

C & D **CHEMIST AND DRUGGIST**

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Council Sends Note on the Levy

"CHEMISTS KNOW MOST ABOUT HARDSHIPS"

THE Council of the Pharmaceutical Society, at its public meeting on January 10, went immediately into Committee to discuss the possible reintroduction of prescription charges, which they oppose in principle. It was decided to send a communication by hand to the Minister of Health with copies to the Prime Minister and the Chancellor of the Exchequer giving the views of the Council.

Members of the Council felt that pharmacists have a greater knowledge than any other section of the community, including doctors, of the hardships that resulted from previous levy schemes. They have evidence that, when charges were imposed, prescriptions issued at the beginning of the week were not presented for dispensing by poorer members of the community until the pay day at the week-end, and that many pharmacists had to make a decision when patients asked that only one of the two or three items prescribed should be dispensed. Many households, too, saved medicines as an insurance against future sickness, regardless of their possible unsuitability.

"Borderline" Substances

PROPOSAL TO MARK PRESCRIPTIONS

THE Ministry of Health is being asked to instruct pricing bureaux to take no further action on National Health Service prescriptions for certain foods regarded as drugs ("borderline substances"), if they are endorsed by the doctor "in accordance with Proplis." The British Medical Association's general services committee has considered (*British Medical Journal* Supplement, January 6) correspondence between the Ministry and Manchester Executive Council in which it was disclosed that bureaux were asked to refer prescriptions for protein-free and gluten-free flour to Executive Councils for consideration of possible surcharge, unless the doctor had indicated that the product was to be used for the treatment of one of the specified diseases. The above endorsement was suggested by the chairman of the Association's central ethical committee, which considered it would be improper for doctors to indicate the condition on the prescription. The G.M.S. committee has also agreed that, when the pharmacist becomes required to convert apothecaries system dosages to the metric system (in March 1969), patients should receive partially filled bottles of medi-

cine if the number of doses specified does not coincide with one of the standard bottle sizes.

Common Cold

EARLY ANTIBIOTIC TREATMENT

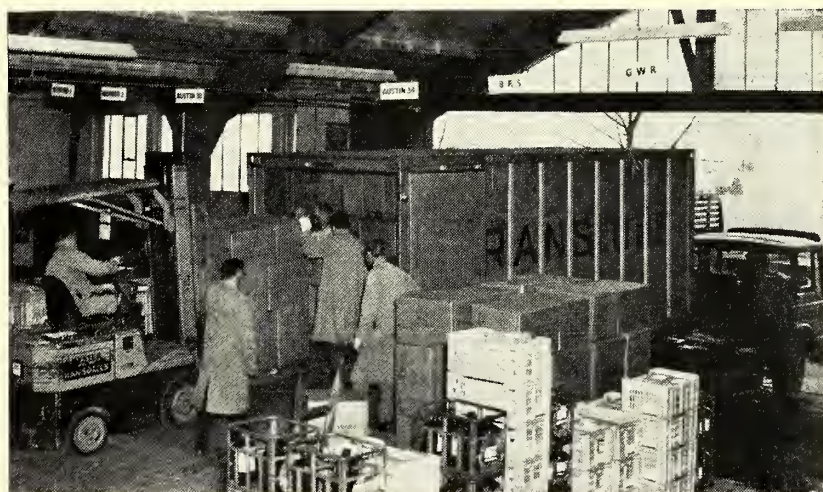
THE common cold can be aborted and rendered non-purulent if treated systematically 6-12 hours or so after the appearance of nose or throat symptoms with an antibiotic for 2½ to 3½ days, reports Dr. Stanley Bank in the current issue of the *Medical Officer*. Dr. Bank's trials were based on the hypothesis that, while viruses were the initiating agents of colds, the troublesome effects (absence from work through prolonged purulent colds, sinusitis, otitis, bronchitis, pneumonia), were the result of enhanced activity of the naso-pharyngeal bacterial flora. Depression of a patient's resistance by the viral infection stimulated the bacteria to multiply, and that was the factor responsible for the potential damage done by colds.

In the trials the best results were obtained when antibiotic treatment commenced within six hours of the onset of symptoms; effectiveness was less at 6-12 hours and less still at 12-24 hours. Treatment for 2½ days seemed adequate in most cases but there were a few failures, and ideally the dosage needed to be tailored to the needs of the individual. In the trials spiramycin adipate (Rovamycin) seemed more effective than tetracycline. Penicillins were not recommended because sensitivity was now widespread in the population. Self-treatment with an antibiotic, says the author, is a departure from current policy and obliges the prescriber to satisfy himself that a prospective patient is likely to be able to store the drug safely and has the necessary understanding to use it at the right time (not after nasal discharge has already become muco-purulent)—a requirement that will "probably limit the use of antibiotics to abort colds for a considerable time and also incidentally limit the appearance of drug resistance."

Aspirin

DOSES FOR CHILDREN

THE Codex Revision Committee proposes that paediatric soluble aspirin tablets, B.P.C., shall contain 75 mgm. of aspirin. That recommendation has been proposed after consultation with the Joint Formulary Committee and appears at the end of an announcement



OVER TO CONTAINERISATION: One of the first freight containers being loaded at the Hounslow, Middlesex, factory of Parke, Davis & Co., following the company's recent decision to go over to that form of freight shipment. The consignment was destined for Sweden.

concerning aspirin doses for children published by the Pharmaceutical Society. The statement is larger than that originally discussed by the Council of the Pharmaceutical Society (see C. & D., December 16, 1967, p. 568) and now reads:—

"Aspirin should not be given to children under one year of age except under medical supervision. The usual dose as an analgesic for a child from one to two years is 75 to 150 mgm. not more than four times daily; from three to five years 225 to 300 mgm. not more than three times daily; and from six to twelve years 300 mgm. not more than three to four times daily. These doses should not be given for more than two days except under medical supervision. The lower dose in each range applies at the lower age, and the higher dose at the higher age. Doses for children aged five to twelve years may be given using aspirin tablets or soluble aspirin tablets containing 300 mgm. For younger children the doses are given in units of 75 mgm. The Codex Revision Committee proposes that paediatric soluble aspirin tablets B.P.C. 1968 shall contain 75 mgm.

The recommendations are intended for inclusion in the British Pharmaceutical Codex, 1968.

Influenza Prophylaxis

DRUG ON TRIAL IN GENERAL PRACTICE

A CONTROLLED study of an oral agent for the prophylaxis of influenza is being carried out by general medical practitioners. The current issue of the *Journal of the Royal College of General Practitioners* seeks the co-operation of members to take part in trials of amantadine hydrochloride, a drug marketed by the pharmaceuticals division of Geigy (U.K.), Ltd., Roundthorne Industrial Estate, Wythenshawe, Manchester, 23, under licence from E. I. du Pont de Nemours & Co., U.S.A. Amantadine is a ten-carbon primary amine. In the laboratory it inhibits multiplication of four strains of influenza virus A, one of A1, three of A2, one of C, and one of para-influenza 1 by preventing penetration of the virus into the cell. The *Journal* says that resting and post-infection serum antibody levels are to be estimated by the University of Sheffield virus research laboratory. The object is to determine the value of the drug and to correlate the immunity of the individual with his serum antibody level. All equipment is being provided by Messrs. Geigy and doctors undertaking the work will receive a fee. Amantadine hydrochloride was passed for clinical studies by the Committee on Safety of Drugs in January 1966.

Out-of-hours Deliveries

LONDON SCHEME STARTS TO OPERATE

FOOD manufacturers' lorries began making their first deliveries to grocery shops in London under a new out-of-hours delivery scheme on January 8. The scheme, sponsored by the Transport Co-ordinating Council for London, follows an experiment of deliveries to selected shops between 6-10 p.m. during May-October 1966 and a report by the Distributive Trades

"Little Neddy" (see C. & D., July 29, 1967, p. 93). The report found that out-of-hours delivery would increase the productivity of both men and vehicles and if widely accepted, would make a valuable contribution to the national campaign to keep down costs and prices. The National Economic Development Office said on January 6 that it hoped the scheme for out-of-hours delivery of groceries would be the first of many such schemes covering different trades and different parts of the country. Scheme outlined, p.40.

Electric Blankets

NEW TEST SCHEDULE

A TEST schedule for electrically heated blankets has been issued by the British Electrical Approvals Board for Domestic Appliances under the recently introduced procedure for the acceptance of new designs or constructions of appliances to which clause 3 of sections A1 and B1 of BS.3456 (1966) applies. The schedule relates to blankets of the bed warmer type and all night type intended for use as over blankets, which are controlled completely or in part by electronic means and are designed to control the bed temperatures and prevent any overheating of the bed, either of a general or localised nature, even under abuse conditions. Copies of B.E.A.B. special investigation test schedule no. 1, "Electronically Controlled Electric Blankets," may be obtained free on application to the Board for Domestic Appliances, Mark House, 153 London Road, Kingston-on-Thames, Surrey.

Supplementary Heating

FIRE HAZARD WARNING

THE Fire Protection Association, in an article in the latest issue (No. 76) of its *Journal* says that the major cause of fires costing £10,000 or more in 1966 was faulty or misused electrical wiring and apparatus. The problem of winter warmth, the article advises, should not be solved by installing portable heaters; particularly suspect are those which are "brought out after months of disuse." They are often placed in stores and warehouses, adding to an already-high fire risk. Combustible materials should not be put in the vicinity of the heater — a fire could easily start, especially if an appliance is accidentally left on at night. The safest way is to have each heater covered by a fireguard.

Chemists' Retail Sales

BOARD OF TRADE STATISTICS

THE index of retail sales by chemists and photographic goods dealers in November, 1967, was 130 (average monthly sales in 1961=100), an increase of 5 per cent. over the same period a year earlier. Figures recently issued by the Board of Trade also reveal the following indices for the month:—

Independent retailers	110 (+4 per cent.)
Multiple retailers	159 (+7 per cent.)
Co-operative societies	119 (—1 per cent.)

The figures do not allow for receipts under the National Health Service.

SCOTTISH NEWS

Scottish Chemists

PAY REVIEWS TO BE ANNUAL

NEXT review of Scottish chemists' income and expenditure will be on 1967-68 figures. Any adjustment of remuneration will be applied from October 1 or as soon after as possible. Subsequent reviews will be made annually, with adjustments applying only to the period under review. Variations in profit margin outside the range 9-11 per cent. will be increased or reduced to 10 per cent. Payment for prescriptions dispensed during the period April 1, 1966, to November 30, 1967 (see C. & D., January 1, p. 6) has been fixed at 0.8d. per prescription. Those details are given in the 1967 annual report of the Pharmaceutical General Council (Scotland). The report also mentions that the two sides of Pharmaceutical Whitley Council Committee B failed to agree on the deduction of £7,000 per annum from the "global" remuneration of chemist contractors to provide a subsidy for "essential rural pharmacies," and it was agreed to postpone disbursement of the money pending a more detailed examination of the subsidy question. An assurance was given that, if the Committee decided to proceed with a rural subsidy and the Government provided the funds, the £7,000 would be added to the general remuneration of chemist contractors. The report states that the Council, asked by the Scottish Department of the Pharmaceutical Society for its views on a proposal to amend the National Health Service (Scotland) Act, 1947, so as to allow a health centre pharmacist to "provide such drugs, medicines, appliances and other items as may be determined by the Secretary of State," had replied that any extension of the services provided by health-centre pharmacists would not be in the interest either of the pharmaceutical service or of the public, and that the Council were strongly opposed to the proposal.

IRISH NEWS

THE REPUBLIC

A SEMINAR on productivity in retailing, open to all community pharmacists, is being held in Galway, on January 17; in Clonmel on January 23 and in Dundalk on January 31, at 2.30 p.m. in each case. Full details may be had from Mr. B. R. Smith, Secretary, Irish Drug Association, 27 Merrion Square, Dublin, 2, or from the Irish National Productivity Committee, 14 St. Stephen's Green, Dublin 2.

THE NORTH

THE Minister of Home Affairs has published the Poisons List (No. 2) Order (Northern Ireland) 1967, the Poisons (No. 2) Regulations (Northern Ireland) 1967 and the Poisons (No. 3) Regulations (Northern Ireland) 1967 (S. R. & O. Nos. 268, 269 & 270) (H.M. Stationery Office, Belfast, price 1s. 6d., 10d. and 3d. respectively), all operative from December 1, 1967.

NEWS IN BRIEF

MR. J. LEVY has initiated an appeal to the High Court against the decision of the Statutory Committee (see *C. & D.*, November 18, 1967, p. 461).

ON April 1 the Cray Valley and Sevenoaks Hospital Management Committee is taking over the management and control of the hospitals at present managed by the Orpington and Sevenoaks and the Sidcup Hospital Management Committees.

"PESTICIDE Residues," by J. Thomson and D. C. Abbott, and "Adhesives" by W. C. Wake (lectures series, 1966, Nos. 3 and 4, price 5s. 6d. and 6s. respectively) have been published by the Royal Institute of Chemistry, 30 Russell Square, London, W.C.1.

"METHODS for the Detection of Toxic Substances in Air — Chromic Acid Mist" (H.M. Stationery Office, price 2s.) is the title of booklet No. 17 in the series "Methods for the Detection of Toxic Substances in the Air" issued by the Ministry of Labour.

THE Royal Institute of Chemistry has published a new edition of its register of members. Price to non-members, firms and institutions is £5 (post free), to members £1 2s. 6d. (post free). The register may be ordered from the Institute, 30 Russell Square, London, W.C.1.

AN exhibition that opened at the Design Centre, 28 Haymarket, London, S.W.1 on January 1 shows how the British Electrical Approvals Board for Domestic Appliances safeguards users against the hazards from electric shavers, electric blankets, etc. It remains open till February 10.

THE National Health Service (Functions of Regional Hospital Boards, etc.) Regulations, 1967 (H.M. Stationery Office, price sixpence), increase from £120,000 to £250,000 the limit of the estimated cost of certain capital works that Regional Hospital Boards may undertake without the consent of the Minister of Health.

REVISED editions of the "Export List" which sets out the classified descriptions under which goods manufactured in the United Kingdom or the Channel Islands are to be entered with the Customs when exported and of the "Statistical Classification for Imported Goods and for Re-exported Goods" are being issued by H.M. Stationery Office shortly at 14s. and 13s. 6d. respectively.

THE Science Research Council has awarded grants totalling £107,408 to four universities for the purchase of computer-controlled diffractometers for x-ray structure analysis. Professor Dorothy C. Hodgkin, Oxford, receives £30,973 for studies of the structure of biochemically interesting molecules such as insulin, vitamins and hormones and Professor G. A. Sim, Sussex, £34,390 for investigations on alkaloids, terpenes and fungal metabolites.

LOCAL OFFICERS

PHARMACEUTICAL SOCIETY BRANCHES
Nottingham.—Acting Secretary, L. Etherington, 80 Woodthorpe Drive, Nottingham. (Telephone: Nottingham 69496 (home); 65842 (business)).

TOPICAL REFLECTIONS

By Xrayser

Medicines Legislation

The comments of the Council of the Pharmaceutical Society on the recent Government White Paper on medicines legislation (p. 15) are now in the hands of all interested. All, I think, will agree that the Council has acted with commendable dispatch, for only three months elapsed after publication of the document before the Society's reactions were forthcoming, and in that short space of time opportunity was taken to consult—and to listen to—Branch Representatives. It is true that the broad lines of the proposed legislation were known in advance of the publication of the White Paper itself, but even so there can be no complaint of the dragging of feet. The comments are, as you state in your editorial, worthy of wide acceptance, viewed in the light of what they in fact are, namely, appropriate comments at the present preliminary stage. It is, I think, important to remember the Society's position in regard to such a document as the White Paper. Over the years since its formation in 1841, the Pharmaceutical Society has grown in stature as the professional body, and I feel that, at the present stage, what the Government was asking for was professional advice from the organisation best qualified to give it. To its credit it has done so in a fair and reasonably detached manner, for the paramount consideration in the drafting of legislation of the kind envisaged is that it shall give the public much needed protection in a field that badly needs its fences repaired. From that point of view the Society has been able to put forward its opinions free of any suggestion of "vested interest." The charge cannot be levelled that self-interest or gain has influenced the Society's attitude. There is nothing self-seeking in recommending that the distribution of drugs of any kind should be in the hands of those who have acquired a knowledge of their properties by long and diligent study prior to examination and qualification. That is an argument beside which the views of the vested interests should be seen for what they are.

Set of Principles

The Society's statement is, I think, professional and correct. One does not find on the Continent little packages of pain-killing tablets rubbing shoulders on the counter with newspapers, confectionery and ball-points. (Nor does one, for that matter, find ball-points in the Continental pharmacy.) The comments are not emotional. They simply stress the vital importance of making full use of the pharmacist's qualifications and experience. If that argument carries no weight, together with the added safeguards recommended in the new legislation, the fight will have to come from other quarters. But it seems to me to be inconceivable that those who drafted the White Paper have not anticipated the arguments of the "opposition," as you describe it, and that the Government will yield easily on the more important matters affecting public safety. But history may tell that devaluation and defence were minor affairs compared with medicines legislation. I congratulate the Council on the statement, and commend its principles to all pharmacists so that they may reinforce its arguments in discussion with those who will eventually tackle the problem on the floor of the House.

More Responsible Attitude

In dealing with Para. 49 of the White Paper, the Society agrees that medicines should be sold to the public only from pharmacies unless there is special exemption, and expresses the view that that principle is essential "not only to avoid risks which are inherent in the use of medicines but also to help bring about a more responsible attitude towards their use." That, I think, is admirably expressed, for there is little doubt that the unlimited and illimitable distribution of medicines by every conceivable kind of establishment dilutes the feeling of respect that is engendered by their purchase from the hands of a trained person in an establishment whose principal business it is. And it is vitally important that pharmacists should make it self-evident that the supply of medicines is the *raison d'être* of their existence.

Second "Man-power in Pharmacy" Report

SMALLER SAMPLE PROBABLY A TRUE REPRESENTATION

THE second complete survey of the man-power position in British pharmacy was conducted in February 1966. The survey asked for information on the occupation and salary of members at April 5, 1965 and is here referred to as the "1965" survey. The first survey, in June 1963, was based on the 1962 register.

At December 31, 1965 28,965 pharmacists were on the Society's Register, of whom about 2,000 lived abroad. A questionnaire was distributed to 26,000 pharmacists resident in Great Britain, exclusive of the Channel Islands and the Isle of Man. 17,600 replies were received, of which 2,000 were not suitable for processing since the answers to one or more questions had been omitted. Of the replies received, 15,651 (58.8 per cent. of the forms sent out) were processed by computer. Most of the rejected replies were from retired members who were unable to complete the question on location of occupation. Thus, although the number of replies utilised is smaller than in the 1962 survey, the Council considers it is probably a true representation of the working pharmaceutical population.

Analysis by Qualification and Sex

Table 1 indicates that the proportion of Fellows was similar in both the 1962 and 1965 surveys. The proportion of graduates has increased as

in the proportion of part-time pharmacists. The distribution of men and women, full-time and part-time by occupations is given in Table 2. The

TABLE 2 DIVISION OF MAIN OCCUPATION GROUPS

	MEN		WOMEN	
	Full-time	Part-time	Full-time	Part-time
	Per cent	Per cent	Per cent	Per cent
General practice	78.7	5.3	7.7	8.3
Hospital practice	41.7	2.5	38.3	17.5
Manufacturing	92.4	2.3	5.0	0.3
Wholesaling ...	91.0	3.9	4.5	0.6
Teaching ...	80.0	6.4	10.7	2.9
Other employment ...	61.5	20.1	13.5	4.9

significance of those figures in hospital practice is considered in more detail below.

Age and Occupation

Table 3 indicates a continually high proportion of pharmacists (49.3 per cent.) over the age of 45. The percentage would probably be nearer sixty if retired pharmacists, many of whose replies were rejected for the reason stated above, were included. In

Pharmacists engaged in teaching are shown separately for the first time.

In the 1962 survey, there were only two subdivisions of general practice (private or company). In the 1965 survey there was provision for indicating employment in independent pharmacies and partnerships, private companies, public companies or co-operatives. Table 3 indicates that there has been no significant change in the proportion of pharmacists engaged in general practice (74 per cent. in 1962 and 75.7 per cent. in 1965). The subdivision into the four groups does indicate, however, that there is a very high proportion of older pharmacists in the private sector, 60.4 per cent. being over the age of forty-five, whereas in the public sector 54.5 per cent. of pharmacists are over forty-five. The under thirty-one age group accounts for only 15.2 per cent. of pharmacists in the private sector as compared with 23.3 per cent. in the public sector. The increase in the under thirty-one age group (from 14.5 per cent. in 1962 to 17.8 per cent. in 1965) should be compared with figures for the whole profession (from 16 per cent. in 1962 to 19.9 per cent. in 1965).

To subdivisions of hospital practice used in the 1962 survey a separate category for deputy chief pharmacist was added for the 1965 survey. Whereas there is no significant change in the proportion of pharmacists in each category, there is a marked increase in the ratio of part-time to full-time pharmacists, especially in the category of "pharmacist" where the proportion of part-time employees has increased from 25 per cent. in 1962 to 52 per cent. in 1965. The apparent improvement in the age structure should be contrasted with the unusual proportion of part-time pharmacists in the younger age groups; most of those (97 per cent. of those under thirty-five) are women who may be expected to leave the service at an early age. About 20 per cent. of hospital pharmacists are in part-time employment and 56 per cent. of hospital pharmacists are women. The comparative figures for the whole profession are 14.3 per cent. and 18.9 per cent., respectively.

In addition to allocating a separate category for pharmaceutical wholesaling, the occupations of pharmacists in industry were further subdivided and showed that 42.1 per cent. of pharmacists employed by manufacturing houses were engaged in sales and representation.

The recent increase in the size and status of schools of pharmacy and the increase in the student population led to a rapid increase in teaching staff.

Summary of Occupation Survey

There is, in general, no marked change in the overall staffing of the main branches of pharmaceutical practice. Elderly pharmacists continued to be preponderant in the

TABLE 1 NUMBERS OF MEMBERS AND FELLOWS BY QUALIFICATIONS

	1965				1962			
	REGISTER 1965*		SURVEY†		REGISTER 1962*		SURVEY†	
	Numbers	Per cent	Numbers	Per cent	Numbers	Per cent	Numbers	Per cent
MEMBERS ...	27,008	93.2	14,507	92.7	26,792	92.9	20,003	92.5
FELLOWS ...	1,957	6.8	1,144	7.3	2,055	7.1	1,632	7.5
TOTAL ...	28,965	100	15,651	100	28,847	100	21,635	100
NO DEGREE ...			13,873	88.7			19,926	92.1
B.PHARM/B.Sc.			1,525	9.7				
M.PHARM/M.Sc.			80	0.5			1,709	7.9
PH.D. ...			173	1.1				
TOTAL ...			15,651	100			21,635	100

* All members, including those overseas.

† Survey returns from Great Britain only.

would be expected since, in the intervening years, an increasing number of pharmacists have qualified by taking university degrees.

No significant change appears to have occurred in the proportion of women pharmacists: 1962—19.0 per cent.; 1965—18.9 per cent. It is known that more women in proportion to the total number of students have entered schools of pharmacy in recent years. That is reflected in the increase of women in the 25-30 age group. But the increase has not yet affected the proportion of women in the profession as a whole. Significantly most women between the ages of 31 and 45 are in part-time employment.

There has been a marked increase

in 1962, 61.4 per cent. of pharmacists were over the age of forty-five. The proportion of pharmacists under the age of thirty, while showing an improvement, contains a substantial number of women who may be expected to retire at least temporarily at a relatively early age.

The fact that a separate classification was used for manufacturing and wholesaling may account for the increase in the combined figure for these groups as compared with the classification "industry" used in 1962. Table 3 shows an apparent increase in the proportion of hospital pharmacists but there has been a marked increase in the ratio of part-time to full-time pharmacists in this type of practice.

TABLE 3
SUMMARY OF OCCUPATIONS AND AGE GROUPS
(Survey figures—excluding retired members)

AGE GROUP	GENERAL PRACTICE		HOSPITAL		MANUFACTURING		WHOLESALE		TEACHING		OTHER		1965 TOTAL		TOTAL ALL PHARM. %	1962 TOTAL %
	F	P	F	P	F	P	F	P	F	P	F	P	F	P		
Under 26 ...	600	76	183	26	116	1	8	0	50	10	33	11	990	124	1,114	925
															(7.2%)	(4.5%)
26-30 ...	1,172	267	162	50	196	4	15	0	85	8	31	13	1,661	342	2,003	2,458
															(12.9%)	(11.9%)
31-35 ...	983	197	110	39	195	3	25	0	49	6	24	5	1,386	250	1,636	1,971
															(10.6%)	(9.6%)
36-40 ...	719	137	92	52	138	3	17	2	35	3	13	8	1,014	205	1,219	1,420
															(7.9%)	(6.9%)
41-45 ...	757	87	101	31	112	4	14	0	36	1	19	4	1,039	127	1,166	1,528
															(7.5%)	(7.5%)
46-50 ...	1,550	80	159	18	187	6	22	0	28	3	34	8	1,980	115	2,095	3,107
															(13.5%)	(15.1%)
51-55 ...	1,799	127	205	14	160	3	18	0	21	0	45	8	2,248	152	2,400	3,283
															(15.6%)	(15.9%)
56-60 ...	1,592	148	134	20	98	1	19	3	2	0	31	9	1,876	181	2,057	2,787
															(13.3%)	(13.5%)
61-65 ...	662	197	47	27	32	2	7	0	6	1	9	5	763	232	995	1,555
															(6.4%)	(7.5%)
Over 65 ...	411	294	11	24	3	6	3	2	2	0	6	11	436	337	781	1,573
															(5.1%)	(7.6%)
1965 F. and P. ...	10,245	1,610	1,204	301	1,237	33	148	7	314	32	245	82	13,393	2,065		
Total ...	11,855		1,505		1,270		155		346		327				15,458	
Per cent ...	76.7%		9.7%		8.3%		1.0%		2.2%		2.1%				(100%)	
1962 F. and P. ...	15,121	1,014	1,490	205												
Total ...	16,135		1,695				1,692				985					20,507
Per cent ...	78.6%		8.3%				8.3%				4.8%					(100%)

F=Full-time. * Includes Locums. P=Part-time

private sector of general practice, where the increase in the proportion in the younger age groups has hardly kept pace with the general increase throughout the profession. The staffing of hospital pharmacies gives cause for alarm since the basic grade, from which the future senior and chief pharmacists may be expected to be selected, contains a high proportion (52 per cent.) of part-time members. Of the 143 full-time "pharmacists," 104 (73 per cent.) are women and of these eighty-six (60 per cent. of full-time "pharmacists") are women under the age of thirty-one. The staffing of the industrial, wholesale and teaching groups appears to be satisfactory so far as the spread of pharmacists throughout the age groups is concerned.

Table 4 shows that there are more pharmacists per pharmacy in South-

eastern England, excluding London, than elsewhere. The size of population per pharmacy ranges from 4,932 in the eastern region to 3,177 in Wales. The figure for London is 3,310.

Projection

In the report of the 1962 survey detailed projections of the pharmaceutical manpower up to 1982 were forecast. These forecasts were based on the assumption that the annual additions to the Register would be 650 home members and 50 members as a result of reciprocity with Commonwealth countries. Even with these additions a decline of 1000 home members was forecast by 1977. In 1962, the home additions were declining and reciprocity additions were increasing slightly. Since then, there has been an increase of 20 per cent in the undergraduate population of schools of

pharmacy, although the proportion of women students has increased and it is probable that any gain from increased intake of students will be offset by the early retirement of women pharmacists. The projections of the 1962 survey, as modified by the increased output of schools of pharmacy and further modified by the increased proportion of women, seem to indicate that pharmaceutical manpower will not keep pace with the increase in the general population.

The entrants to schools and the number of new registrations in recent years have been as follows:

	Entrants	Passes	New Registrations
1960	752	1963 592	1964 515
1961	709	1964 647	1965 498
1962	743	1965 590	1966 556
1963	812	1966 706	(up to
1964	906		Dec. 21)
1965	908		
1966	799		
1967	803		

From the three-year group of entrants in 1960-62 and the three-year group of new registrations 1964-66, it can be calculated that:

900 entrants will produce 630 new members
1000 entrants will produce 700 new members
1100 entrants will produce 770 new members

As already stated, 650 new home plus fifty reciprocity registrations per annum will lead to a decline of 1000 in home membership by 1977. It is estimated that nearly 800 new registrations per annum are required to avoid that deficiency which, in turn, means an annual intake of approximately 1150 students.

The above calculation provides for the maintenance of the home membership at its present figure. The following factors, however, must be taken into account when estimating future manpower requirements: (a) The actual need for pharmacists; (b) the "hidden potential" of married women who are

TABLE 4 REGIONAL RATIOS OF PHARMACISTS IN GENERAL PRACTICE TO POPULATION AND TO REGISTERED PREMISES

REGION	A	B	C	A/B	C/A	C/B
1	PHARMACISTS	PHARMACIES	POPULATION × 1000			
2	3	4				
Northern ...	1,320	829	3,295	1.6	2,496	3,974
East and West Ridings	1,528	1,091	4,231	1.4	2,269	3,878
North Midland ...	1,260	783	3,731	1.6	2,961	4,765
Eastern ...	1,286	791	3,901	1.6	3,033	4,932
London ...	3,041	2,469	8,173	1.2	2,688	3,310
South Eastern ...	1,521	896	3,018	1.7	1,984	3,368
Southern ...	1,246	783	2,972	1.6	2,385	3,796
South Western ...	1,558	1,040	3,492	1.5	2,241	3,358
Midland ...	1,585	1,099	4,893	1.4	3,087	4,452
North Western ...	2,541	2,018	6,656	1.2	2,619	3,298
Wales ...	1,051	838	2,662	1.3	2,533	3,177
Scotland ...	1,821	1,500	5,204	1.2	2,858	3,469
Great Britain ...	19,758	14,137	53,673	1.4	2,717	3,797

1.—Standard Regions in 1965—since modified.
2.—Survey figures × 100 (Allowance for per centage of forms returned and processed).
3.—1965 Register.
4.—Abstract of Regional Statistics No. 1, 1965, H.M.S.O. (1963 figures).
A/B—Pharmacists per pharmacy.
C/A—Population per pharmacist in general practice.
C/B—Population per pharmacy.

no longer registered, or, if registered, are not practising; (c) the large number of part-time pharmacists in the lower age groups who, if necessary, could resume full-time employment; and (d) the increasing tendency for graduates to enter fields of employment outside pharmacy.

The Need for Pharmacists

Discussions with representatives of the pharmaceutical industry after the 1962 survey indicated that, while some companies were satisfied with their present establishment of pharmacists, the majority felt that there was still an unsatisfied demand, especially in the area of representation. That unsatisfied demand was suggested as being of the order of 10 to 15 per cent. (200 to 300 members).

In hospital pharmacy there has been a decline of 300 full-time pharmacists in the three years between surveys. That decline has been most marked in the younger age groups and in the "pharmacist" grade.

In general practice the picture is complicated by the fact that there is still a large number of pharmacies serving a relatively small population and, consequently, the decline in the number of registered premises, which has become more marked in recent years, can be expected to continue. That could lead to a redistribution of manpower in general practice. If the total number of members (full- and part-time) in general practice remains constant at approximately 20,000 and the number of premises declines until there is an average of two pharmacists to each set of premises, then there would be one pharmacy for 5,400 of population, as opposed to one pharmacy for 3,800 in 1965.

EXPANSION PROJECTS

A PHARMACEUTICAL research centre is being built by Farbenfabriken Bayer, A.G., at Wuppertal-Elberfeld, West Germany, at a cost of about DM. 80 million (£8.8 million). Part of it, the institute for pharmacology and toxicology, which cost some DM. 45 m. is already in operation. By 1971 the research centre will include facilities for bacteriology, experimental pathology, parasitology and veterinary medicine. The centre will employ around 1,200 people.

MANUFACTURERS' ACTIVITIES

Breathmeters For Export.—An American order for 150,000 breathmeters, worth £40,000, was recently received by Cotswold Chemical Co., Ltd.

Control by Computer.—A chemical plant control system, whose day-to-day production flow is planned and executed by a computer, has been brought into operation by Imperial Chemical Industries, Ltd., at one of its new petrochemical plants in the Tees-side area.

Packaging Machines on Show.—A comprehensive selection of packaging machines for filling and bottling all perfumery, toiletry, cosmetics and phar-

maceutical preparations will be shown by Albro Fillers & Engineering Co., Ltd., Wharf Road, Ponders End, Middlesex, at the Interphex '68 exhibition to be held in London, March 12-14.

Showing the World a Clean Face.—When Julian Goatcher, London, N.6, and David Hogg, New Barnet, Herts.,

SCOTTISH DRUG TESTING SCHEME

Review of work for 1966-67

BETWEEN July 1966 and June 1967 973 formal samples were received for testing by the Pharmaceutical Society under the Scottish drug-testing scheme. Forty-nine samples of dressings were forwarded to the Manchester Testing House for examination. 132 samples of antibiotics or vitamins were examined microbiologically and a sample of eye-drops was tested for sterility. Nine of the samples were for extemporaneous preparations from a formula supplied by the prescriber.

Labelling, in general, is reported as satisfactory. Five ointments in tubes were supplied without labels but the manufacturers' instructions were printed on the tubes. Ninety-three prescriptions were endorsed "N.P." and in all but four cases the pharmacist had complied with the request.

Criticisms

Seven samples were the subject of adverse reports. Twenty-one containers were considered not entirely satisfactory, and matters for adverse comment included the use of a clear glass bottle for dispensing tablets that should have been protected from light; a mixture of belladonna and ephedrine found deficient in potassium iodide to the extent of 14 per cent.; tablets of mercaptopurine double the prescribed strength dispensed and patient instructed to use half a tablet (full number of tablets prescribed was dispensed, so patient received twice the quantity prescribed), compound tablets of ferrous sulphate dispensed in place of the tablets of ferrous sulphate. Tablet Ferromyn-B dispensed in place of tablet Ferromyn; industrial spirit dispensed when surgical spirit was prescribed. Capsules Indocid labelled "tablet phenobarbitone, gr. $\frac{1}{2}$." (instructions to patient were also wrong, though patient's name was correct), and ninety-one compound codcine tablets dispensed when 100 tablets were prescribed. In all the above cases adverse reports were issued.

A tube of ointment dispensed with an 18 per cent. deficiency in weight of contents was queried with the manufacturer, whose reply made it obvious that the tube was abnormal and that adequate control was exercised. Other formal samples included seven of a proprietary capsule that was found to contain excesses of 20-35 per cent. of aneurine hydrochloride (that was an intended overage against loss on storage and adverse reports were not issued). An excess of 75 per cent. of aneurine in elixir was considered excessive. The manufacturer was informed and is considering some reduction. A sample each of elixir phenobarbitone and linctus codeine, which should have been prepared to the for-

set out from London on January 1 to drive around the world in a Land Rover they took with them stocks of Techmatic razors, Foamy shaving lather, scalpels and syringes provided by Gillette Industries, Ltd., Isleworth, Middlesex. The pair are visiting America, South-east Asia and India.

mulas of the British Pharmaceutical Codex, 1966, Addendum, were of the B.P.C., 1963, formulas, and the pharmacists concerned were asked to adjust their stocks to the new formulas.

Informal Samples

Informal samples tested by the Society include samples submitted from pharmacies and examined informally at the pharmacist's request; others taken informally to supplement information obtained in the revision of the British Pharmaceutical Codex; and samples obtained from retail shelf stocks when there is reason to investigate the possibility of deterioration of particular preparations. That arrangement does not form part of the drug-testing scheme under the National Health Service.

A total of 207 such samples submitted from pharmacies were examined, thirty-two of them at the request of the pharmacist. Of fifty-one samples of eye drops, eleven were found non-sterile. Where they had been manufactured by industrial firms a report was sent to the company concerned.

Strong compound aneurine tablets had been reported as unstable. Four samples dealt with complied with the B.P.C. specifications. Of a further twenty-one vitamin preparations all but one were satisfactory, overage, if any, being within the official tolerances. The exception was ascorbic acid tablets (vitamin content satisfactory but tablets discoloured).

Eight samples of emulsion of liquid paraffin with phenolphthalein were examined to confirm reports that the phenolphthalein settled out on storage. Where the preparation had been made to the formula in the B.P.C. that was found to be the case.

Of fifteen samples of stock solutions of galenicals examined most were satisfactory. A sample of spirit of nitrous ether contained only 30 per cent. of the required amount of ethyl nitrite. Compound infusion of gentian was low in total solids. The strength of a solution of ammonium acetate was wrongly quoted on the label.

Samples of ointments, including five eye ointments, were examined for metal particles. None contained particles above 0.2 mm. in length.

Following reports of microbiological contamination of drug and stock mixtures, twenty-four samples were obtained for testing. All the samples were found chemically satisfactory. Microbiological tests showed a variation in the level of contamination. Sixteen samples were sterile. A sample of nasal drops contained 100,000 organisms/mil. A sample of emulsion of liquid paraffin and phenolphthalein contained 180,000 organisms/mil.

COMPANY NEWS

Previous year's figures in parentheses

SYNTEX CORPORATION, Panama. — Net sales in year ended July 31, 1967, \$67.2m. (\$56.3m.); gross profit, \$51.1m. (\$43.8m.). Research expenditure was 12 per cent. of sales.

GNOME PHOTOGRAPHIC PRODUCTS, LTD. — A 15 per cent. increase in turnover and a corresponding rise in profits are announced for the half-year ended November 30, 1967, and the directors are confident that figures for the year ending May 31, will at least reach the 1966-67 level.

VITAMINS, LTD. — Mr. H. C. H. Graves (chairman and managing director) and Dr. M. D. Wright (research director) are retiring on March 31. Mr. Graves will continue to act as consultant to the company for some time to come and will represent the company in appropriate trade association and general liaison work.

MANBRE & GARTON, LTD. — Revised terms for the substitution of the £1,784,540 Preference capital for loan stock have now been put forward which give an increase of 25 per cent. in gross annual income — a 5 per cent. rise over last year's offer. An earlier offer was defeated because the directors "did not receive sufficient support from holders" of the second Preference stock.

BORAX HOLDINGS, LTD. — The directors announced on January 5 that a bid for the company had been received from Rio Tinto Zinc Corporation, Ltd. (R.T.Z.). The offer by R.T.Z. is three Ordinary 10s. shares for every ten deferred Ordinary 5s. Borax. If the merger takes place Lord Clitheroe (chairman) and Mr. N. J. Travis (managing director) plus two executive directors are expected to join the R.T.Z. board.

GLAXO GROUP, LTD. — The Group's offer for the whole of the issued Preference capital in B.D.H. Group, Ltd. (B.D.H.) and for the 65 per cent. of the issued Ordinary capital of B.D.H. not already owned by Glaxo (see C. & D., November 25, 1967, p. 490), have been accepted in respect of 80.3 per cent. of the Preference capital and 86.1 per cent. of the Ordinary capital for which the offer was made. The offers have been declared unconditional, subject only to quotation for the new ordinary shares and loan stocks of Messrs. Glaxo being granted, and remain open for further acceptances.

BUSINESS CHANGES

The Pinkerton Smith branch of Vestric, Ltd., Block 4, Donibristle Industrial Estate, Dunfermline, Fife, is now trading as Vestric, Ltd.

MR. P. HEATHER, M.P.S., has acquired the Foxhole Pharmacy, 99 Foxhole Road, Paignton, Devon, from Mr. J. Watson, M.P.S.

MR. J. BRIGGS, M.P.S., 365 Tong Street, Dudley Hill, Bradford, 4, is retiring from business on January 31.

MR. F. A. QUINEY, LTD., 50 Spring Lane, London, S.E.25, closed down on January 1.

WALKDEN PHARMACY, LTD., 4 Hodge Road, Walkden-in-Lancashire, has been acquired by Mr. H. F. Budd, M.P.S., and Mrs. B. Budd, from Messrs. D. Swerling and G. M. Morris, Ms.P.S.

MR. H. W. PARKER, M.P.S., has acquired the pharmacy of Mr. E. H. Kidner, M.P.S., 191 Cardiff Road, Newport, Mon., and will operate under his own name as from January 29.

MR. G. A. WEAVER, M.P.S., has acquired the pharmacy of Mr. A. I. Lloyd, M.P.S., 22 States Arcade, Guernsey, and will trade as Lloyds (Chemists), Ltd. Mr. Lloyd took over the business from the late Mr. F. H. de la Rue in 1938.

APPOINTMENTS

Directors

LANCOME (ENGLAND), LTD. — Mr. Rene L. Berland has been appointed managing director.

HOECHST CHEMICALS, LTD. — Messrs. R. J. Gardner and J. E. Salmon have joined the board. Mr. A. J. Risby (previously in charge of the plastics division and managing director, Plasfoils, Ltd.), has resigned from the company and the board.

BEECHAM GROUP, LTD. — The Group's two divisions handling prescription medicine and proprietary businesses in Europe are being merged. Unified operation will involve a measure of reorganisation, and, arising from this, Mr. C. D. W. Stafford, F.P.S., group executive vice-chairman, will also act as chairman of the combined European division. Mr. K. A. B. Moore has tendered his resignation from the board and from the executive appointment of chairman, European proprietaries division. Appointed directors of the company are: Dr. R. J. L. Allen, M.Sc., Ph.D., F.R.I.C., as group research director; Mr. W. G. Petley, F.A.C.C.A., group financial director and Mr. J. D. Smartt, M.P.S., group personnel director. Mr. Walter McGeorge, B.Sc., F.R.I.C. (for many years responsible for group research and development), has resigned from the board on reaching retirement age.

Executives

CARLO ERBA (U.K.) LTD., 28 Great Peter Street, London, S.W.1, have appointed Mr. G. J. Dack, marketing executive and Messrs. R. G. John and A. I. Brayfield, area managers.

SOPHISTIQUE, LTD., New Road, Winsford, Ches., have appointed Mr. A. Burt their general manager. Mr. Burt has also been elected to the board. Mr. J. Wilson has been appointed the company's sales representative for North-west England.

DREAMLAND ELECTRICAL APPLIANCES, LTD., announce that Mr. M. Harding (sales manager) now controls home and export sales and Mr. D. Tizard is marketing manager. Three representatives who have been with the company for several years have been promoted to area managers, and new staff have been taken on to reinforce the sales force.

IMPERIAL CHEMICAL INDUSTRIES, LTD. — Mr. P. W. Cunliffe, (manager, pharmaceuticals division's European department, and Mr. G. R. Underwood (a production manager, dyestuffs division) have been appointed directors of the pharmaceuticals division from March 1. Dr. H. W. Thompson retires as director of division.

Research

TROPICAL PRODUCTS INSTITUTE have appointed Dr. E. M. Thain deputy director of the Institute.

PERSONALITIES

MR. PAUL BLANC (formerly chief pharmaceutical officer, pharmaceuticals unit, division of pharmacology and toxicology, World Health Organisation) has been appointed a part-time consultant to the American Society of Hospital Pharmacists. Mr. Blanc is an honorary member of the Pharmaceutical Society of Great Britain.

DR. J. A. B. GRAY succeeds Sir Harold Himsworth as secretary of the Medical Research Council when Sir Harold retires on September 30 or earlier. Dr. Gray has been the Council's second secretary since May 1966 and previously held a chair of physiology at University College London, serving latterly as the dean of the faculty of Science, University of London.

MR. A. W. KAY who retired recently from the position of managing director of Winthrop Laboratories, Ltd., has been appointed by the Minister of Health to succeed to the chairmanship of the Newcastle Regional Hospital Board from April 1. Mr. Kay has been a member of the board of governors of the United Newcastle Hospitals since 1953. He is chairman of the People's Theatre, Newcastle upon Tyne, and was awarded the O.B.E. in 1962 for services to the arts.

OVERSEAS VISITS

MR. G. McCONNOCHIE, managing director, Jackel & Co., Ltd., left for Canada and the U.S.A. on January 2. Mr. McConnochie has gone specifically to Canada to launch a nail strengthener on the Canadian market. He will be speaking at the sales conference of Maltby Brothers, Ltd., who are to handle the product in Canada and appointments have been made for him to visit leading departmental stores in Toronto and Montreal. He will later travel to New York and to California.

MR. JOHN DAVIES (director general, Confederation of British Industry), has left for an eight-day trip to Portugal, where he will put the C.B.I.'s view at a conference called by the Portuguese Federation of Industry to discuss Britain's approach to Europe. He will have talks with members of the Portuguese committee of the European Free Trade Association and the Portuguese Chamber of Commerce. Mr. Davies will visit South Africa in April this year.

DEATHS

ANDERSON. — On December 12, 1967, Mr. Reginald Edwin Anderson, M.P.S., 3 Brandon Court, Poole Road,

Bournemouth, Hants. Mr. Anderson qualified in 1922.

AUSTIN. — On December 18, 1967, Mr. Patrick Laurie Austin, M.P.S., 15 Brantcliffe Drive, Baildon, Shipley, Yorks, formerly of 53 Randolph Road, Glasgow. Mr. Austin qualified in 1922.

BARRIE. — At Longmore Hospital on January 1, after a short illness, Mr. David Barrie, M.P.S., 35 Hillview Road, Corstorphine, Edinburgh. Mr. Barrie qualified in 1920 and was in business in College Street, Edinburgh for many years. He retired six years ago.

BREAKSPEAR. — On December 14, 1967, Mr. Arthur Edward Breakspear, 6 Grassy Lane, Maidenhead, Berks. Mr. Breakspear qualified as a chemist and druggist in 1909.

BROCKLEHURST. — On December 20, 1967, Mr. John Brocklehurst, M.P.S., Cherry Dene, Mersham, Ashford, Kent. Mr. Brocklehurst qualified in 1932.

COSTELLO. — On December 24, 1967, Mrs. Elizabeth Costello, Upper Drumcondra Road, Dublin, Eire, widow of the late Mr. Timothy Costello, M.P.S.I., who died in 1937, and the mother of Mr. Denis Costello, M.P.S.I., Drumcondra, Dublin.

CRESSWELL. — On December 15, 1967, Mr. Ernest Percy Cresswell, M.P.S., 6 Market Hill, Saffron Walden, Essex. Mr. Cresswell qualified in 1921.

DALY. — Recently Mr. Richard Daly, M.P.S.I., Richfield, Rhodaville, Douglas, Cork, Eire. Mr. Daly qualified in 1935, and was a member of the Council of the Pharmaceutical Society of Ireland, 1945-54. For many years he carried on his own pharmacy in High Street, Cork, and was active in all local pharmaceutical affairs.

DANKS. — On December 7, 1967, Mr. Percy Danks, 91 Rudston Road, Childwall, Liverpool, 16. Mr. Danks qualified as a chemist and druggist in 1923.

FEATHER. — On January 5, Mr. Richard Campbell Feather, M.A., B.Sc., F.R.I.C., M.I.Chem.E., F.B.I.M.,

church schools, Twickenham, and a member of the Education Committee of Twickenham Borough Council (later the Richmond-on-Thames Borough Council).

Mr. Arthur Shaw writes: The sad news of the death of Mr. R. Campbell Feather will be received with great regret by his many friends in pharmacy; in particular colleagues in the pharmaceutical industry will mourn his passing. Campbell Feather was a man of many attainments and organisations counted themselves fortunate to have the benefit of his expertise which stemmed from academic distinction and practical business experience. Others are better qualified than I to speak of his service to the Chemists Federation and his interests in the educational field. However, as far as the A.B.P.I. and its predecessor the Wholesale Drug Trade Association is concerned, his record of service is probably unique. He was a member of A.B.P.I. Council from 1949 to 1951 and from 1954 to 1959; more recently he was a member of the A.B.P.I. Board of Management from 1964 to 1966. Within the Association, Campbell Feather was primarily concerned with Division A (standard formula medicines) and was chairman of that division in 1954 and again in 1964 holding office on both occasions for two years. He also served as a member of many specialist committees. His many appointments are an indication of the high esteem in which he was held by his colleagues. An esteem shared by members of the Association staff to all of whom he extended unflinching courtesy and co-operation. His cheerfulness and sincerity of purpose were never more in evidence than in the last few years when he met, and surmounted, problems associated with hospitalisation and medical treatment. His courteous manner and readiness to listen to others tended to obscure, but never effaced a sense of humour and a clear analytical mind. A combination which commanded respect and which will be greatly missed.

FENTON. — Suddenly at his home in West Norwood, Mr. Francis Edward Fenton, sales manager, Brome & Schimmer, Ltd., 7 Leathermarket, London, S.E.1, aged fifty-three. Mr. Fenton had been with the company for nearly forty years.

FOX. — On December 24, 1967, Miss Maureen Christina Fox, M.P.S.I., 17, Upper Ormond Quay, Dublin, Eire. Miss Fox qualified in 1930. A native of Milltownpass, co. Westmeath, she served an apprenticeship in Mullingar, and after qualifying worked in Moate and in the pharmacy of Dr. Dalton, Banagher, co. Offaly. In 1932 she purchased the pharmacy in Upper Ormond Quay.

GOLDSTRAW. — On December 21, 1967, Mr. Malcolm Challinor Goldstraw, M.P.S., 6 Marpool Hill, Exmoor, Devon. Mr. Goldstraw qualified in 1916.

MELLOR. — On December 21, 1967, Mr. George Lionel Mellor, M.P.S., 84 Crossland Road, Huddersfield, Yorks. Mr. Mellor qualified in 1938.

REES. — On December 31, 1967 (see C. & D., January 6, p. 6, Mr. W. Talvan Rees, F.P.S.).

Dr. Harold Davis writes. — The first number of the C. & D. in 1968 brought the sad and unexpected news of the death of Mr. W. Talvan Rees. To me, his old teacher, it was particularly sad. I well remember Talvan coming to the pharmacy department of the Swansea and West Wales municipal Technical College in 1925 during my first year as lecturer in pharmacy in the college. His father, John Rees, the well loved treasurer of the local branch of the Pharmaceutical Society, proudly introduced him. Talvan had an immediate impact on his fellow-students and staff, soon showing his qualities of sincerity and leadership, which did so much for his profession in later years. In sport as in his studies he was outstanding; I can vouch for both as I played with him in the college rugby and hockey teams. It was no surprise, therefore, when from 1950 onwards I saw his name with increasing frequency in the pharmaceutical Press as a diligent member of the N.P.U. Executive. Here was the outlet for his zeal, energy and love of his profession. No pharmacist has contributed more with his selfless devotion to furthering the welfare and public image of the pharmacist in general practice. His friends were delighted when he became one of the first fellows of the Pharmaceutical Society under the new by-law in June 1966. No choice for inclusion was more appropriate. It is sad to think that a little more than a year after, and at the height of his professional career, he should be taken from us. Pharmacy and his many friends will remember him with great affection. To his loving widow, sons and daughter we extend our deepest sympathy.

Mr. Cecil Jacobs writes: — I write with a feeling of great sadness to pay a personal tribute to the late Talvan Rees. I first met him when I joined the National Pharmaceutical Union Executive Committee in 1962. At that time he had given twelve years' service as a member of the Committee, and was a past-Chairman of the Union. From the first meeting I was fortunate to gain his friendship, and subsequently, month by month, was able to appreciate more and more his sterling qualities and his impact on pharmaceutical affairs, both in Gloucestershire and surrounding area and also nationally. He brought a clear-thinking, logical approach to our problems, and those of us who knew him in committee always valued his sound judgment, good common sense, and foresight. He was proud to be engaged in the retail practice of pharmacy, ever bearing in mind the professional ideals he always fought for with untiring effort. He came from a pharmaceutical family, and in turn inspired his own children to the service of others; one son is a dental surgeon, the other son is doing pharmaceutical research, while his daughter is in the nursing profession. Talvan will be sadly missed by all who, like myself, enjoyed sharing his friendship, good company, and genial personality.



a former chairman and managing director of Meggeson & Co., Ltd. Mr. Feather was educated at St. Paul's school and Oxford University. In the years 1938-58 he was a member of the Chemists Federation Council, its president in 1948. He was also an active member of the Association of the British Pharmaceutical Industry, holding many offices over the years and representing the Association on two British Standards Institute committees. Mr. Feather had many interests outside the industry, being at one time a member of board of Fellows of the British Institute of Management, a governor and former chairman of governors to Twickenham College of Technology, governor of Isleworth Polytechnic, trustee of St. Mary's

"GRASS STAGGERS" IN FARM ANIMALS

Protection by a new "bullet" method

A WEIGHTED magnesium alloy "bullet"—the Agrimin—that may be given to cattle and sheep to protect them against the acute form of hypomagnesaemia ("grass staggers"), occurring on spring pastures, has been produced commercially by Agricare Products (Pfizer, Ltd.), Sandwich, Kent.

Two "bullets" are required to dose a dairy cow and one to dose a ewe. They are given orally by a special "gun" two to three days before start of the risk period and, in the reticulum or rumen of the animal, are slowly broken down through electrolytic action, releasing magnesium continuously throughout the critical few weeks of maximal risk from attack.

Research on the magnesium bullet was begun some years ago by workers at Glasgow University, and the present bullet, "an intriguing metallurgical invention," was perfected and extensively tested under field conditions by research workers of both the university and Pfizer, Ltd., under Dr. L. A. Davey (head of the company's animal nutrition research department). Hypomagnesaemia attacks especially ewes soon after lambing and recently calved, high-yielding dairy cows, striking rapidly and often fatally in the first few weeks after the animals are turned on to spring grazings; the disorder has come to be associated with high-production grassland management. For prophylaxis, a continuous supply of magnesium is essential.

How the Product Came About

At a conference in London on January 9, Dr. C. A. E. Briggs (veterinary and agricultural research director for Messrs. Pfizer), paid tribute to the work of the two university scientists (Drs. R. G. Hemingway and N. S. Ritchie) who had been responsible, he said, for the original concept and much of the development work. The trials were in commercial herds and flocks in various parts of the United Kingdom and embraced dairy cattle and sheep on spring grazings with a known "history" of the hypomagnesaemia



Specimens of bullet "breakdown."

problem. Animals were studied in roughly equal groups of controls (receiving no supplementary magnesium) and "bulleted" animals. Magnesium blood levels in both groups were frequently found to be reassuringly high during the periods of expected danger: in fact, in many of the controls the blood levels were as high and sometimes higher than in the "bulleted" animals. No case of clinical hypomagnesaemia occurred in any of the "bulleted" groups, but several casualties, many fatal, occurred in the controls.

Dr. Vernon considered that the significance of the magnesium bullet was in its ability to provide, in a single dose, a method of directing a continuous 24-hour release of acceptable and effective magnesium into the

blood stream. There were no problems of palatability and far less of the element of uncertainty associated with other methods of protection such as pasture-dressing. "Perfect" protection was not claimed for the method.

Cylindrical in shape, the cow "bullet" is 3 in. long and 1 in. in diameter, and weighs about 90 gm.; that for sheep is 1½ in. long and ¾ in. in diameter and weighs about 35 gm. The two-bullet dose for a dairy cow costs 15s.; one bullet for a ewe costs 3s. Bulleting guns cost 28s. and 25s. respectively. The "bullet," sharply different from the well known cobalt "bullet" in being positively electrolysed in the rumen solution (not passively eroded by collision with other contents of the rumen), is composed of an alloy containing eighty-six parts of magnesium, twelve parts of aluminium and two parts of copper in which are embedded iron pellets that set up an electrolytic breakdown, the pellets being afterwards excreted unchanged.

TRADE NOTES

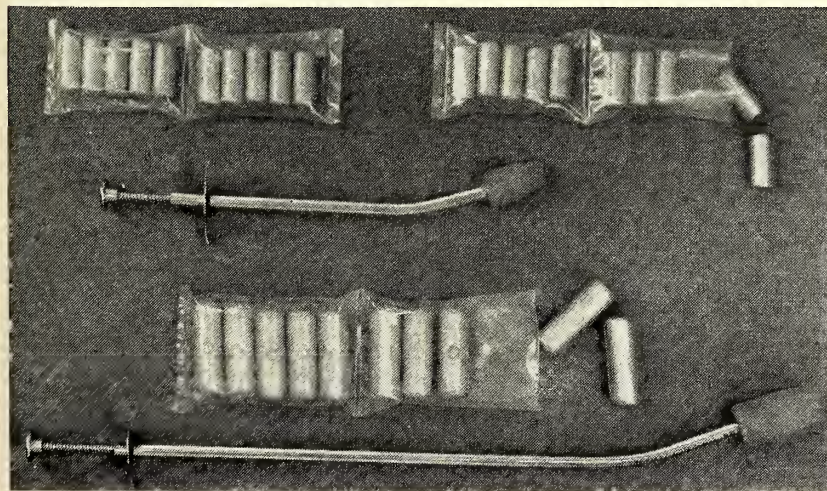
A New Size. — A 6-oz. size of Docteur Pierre's *eau dentifrice* has been introduced by H. L. Jaccaz & Co., 32 Shaftesbury Avenue, London, W.1.

Pack Change. — Boots Pure Drug Co., Ltd., pharmaceutical division, Station Street, Nottingham, have replaced with a 1-litre pack the 40-oz. dispensing pack of Pertusa childrens' cough linctus. All future orders are being met with the new pack.

Still Price-maintained. — Phillips Scott & Turner Co., St. Mark's Hill, Surbiton, Surrey, point out that their products as listed in the Quarterly Price List continue to be price-maintained. By a misunderstanding entries under "This Week's Changes" in the January 6 issue of the *C. & D.* indicated otherwise.

A Pack of 100 Mills. — The pharmaceutical division of Imperial Chemical Industries, Ltd., Alderley House, Alderley Park, Macclesfield, Ches., announces that a new 100-mil pack of Imperacin (oxytetracycline) syrup is being made available from January 15, in addition to the 60-mil bottle already available. This pack will enable a full-five day course of broad-spectrum antibiotic therapy to be dispensed from a single bottle.

Now Generally Available. — Test sets for the diagnosis of aspergillosis, a disease of the lungs due to infestation with the mould *Aspergillus fumigatus*, are available from Bencard (a branch of Beecham Group, Ltd.), Great West Road, Brentford, Middlesex. The test is carried out by the "gel diffusion" method evolved at the Institute of Diseases of the Chest, Brompton Hospital, London. Each set comprises two vials of test antigens and a vial of control solution (0.9 per cent. saline). The test vials each contain an aqueous solution of purified antigens at a concentration of 30 mgm./mil; 0.1 per cent. sodium azide is included in all three vials as a preservative. Each set provides sufficient material for up to ten tests and contains full directions for use.



"Bullets" and bulleting "guns" for cattle and sheep.

Protein-free and Gluten-free Diets.—Welfare Foods (Stockport), Ltd., 63 Higher Hillgate, Stockport, Ches., and Vestric, Ltd., Chapel Street, Runcorn, Ches., announce that the Rite-diet range of dietetic products is being distributed by Woolley & Arnfield, Brinksway, Stockport, and Nelson Street, Preston; Knights branch of Vestric, Ltd., Church Road, Perry Barr, Birmingham; and Vestric, Ltd., Graham Street, London, N.1. Hospitals and retail pharmacists in those areas can obtain supplies from their nearest Vestric branch. The range comprises Rite-diet gluten-free bread (two-loaf and four-loaf packs), rusks, biscuits and flour (1-lb. and 7-lb. packs with recipes) and Rite-Diet protein-free bread, with or without salt (two-loaf and four-loaf packs), rusks (salt-free only) and flour (salt-free only) (1-lb. and 7-lb. packs).

Single Size for Each Tablet.—Cox-Continental, Ltd., 85 Church Road, Hove 3, Sussex, are rationalising the range of Co-tab pack sizes, so that each product will have only one size based on that most frequent ordered during the past three years. Packed in containers of 1,000 will be: A.3 (amylobarb., 30 mgm.), A.11 (acid. acetylsal., 300 mgm.), A.18 (acid. acetylsal. co.), A.21 (aminophyll., 100 mgm.), A.40 (acid. ascorbic.), 50 mgm.), C.15 (calc. lact., 300 mgm.), D.17 (dexamphet., yellow), 5 mgm.), E.3 (ephedrin. hyd., 30 mgm.), F.1 (folic acid, 5 mgm.), F.10 (ferrous gluconate 300 mgm.), F.11 (ferrous sulph., 200 mgm.), P.5 (phenobarb., 30 mgm.), P.10 (paracetamol, 500 mgm.), S.18 and S.19 (stilboestrol, 1 mgm. and 5 mgm.), T.1 and T.10 (thyroid, 30 mgm. and 60 mgm.). In packs of 100 will be B12 (barbitone, 300 mgm.), E.12 (ergometrine maleate, 500 microgm.), G.10 (glyc. trinit., 600 microgm.), p.32 (phenoxymethylpencil, 250 mgm.), P.37 (prednisolon., 5 mgm.), and P.38 (prednison, 5 mgm.). Twenty-two products have been discontinued. The remainder are in packs of 250.

Bonus offers

LENBROOK LABORATORIES, LTD., Thane Road West, Nottingham. Top Score hand care. Twelve invoiced as ten.

Andre Philippe, Ltd., 71 Gowan Avenue, London, S.W.6. Aerosol hair lacquer and hair spray range 7½ per cent. additional discount on assorted parcel value £10.

BARNANGENS VADEMECUM, LTD., 4 Tribune Drive, Sittingbourne, Kent. Vademecum products. Fourteen invoiced as twelve (complete dozens). Till March 16.

EVER READY PLASTICS CO., LTD., Romside Trading Estate, Chesham Close, off Cedar Road, Romford, Essex. Slim-line polarised sunglasses. Extra 5 per cent. discount on orders placed before February 29.

MAWS PHARMACY SUPPLIES, LTD., Aldersgate House, New Barnet, Herts. Simpla sterilising tablets, 2½ per cent. discount on two outers, 5 per cent. on four and 10 per cent. on six. (Introductory bonus).

NEW PRODUCTS AND PACKS

PHARMACEUTICAL SPECIALITIES

For Urinary Infection.—Harker Stagg, Ltd., 6 Argall Avenue, London, E.10, are issuing for the treatment of urinary tract infections G500 sugar-coated tablets, each containing 250 mgm. of hexamine mandelate and D-methionine. Packs are of fifty and 500.

Potassium Effervescent Tablets.—Sandoz Products, Ltd., 23 Great Castle Street, London, W.1, have introduced a potassium supplement with chloride ions: potassium-Sandoz effervescent tablets. Each tablet produces an effervescent drink providing 470 mgm. of potassium and 119 mgm. of chloride. Pack holds four 25's.

Enzyme-enhanced Tetracycline.—Armour Pharmaceutical Co., Ltd., Hampden Park, Eastbourne, Sussex, have introduced a new speciality Chymocyclar capsules each containing 250 mgm. of tetracycline hydrochloride and an enteric-coated core of concentrate of trypsin and chymotrypsin giving 50,000 Armour units of enzymatic activity. Product is for use in infections due to tetracycline-sensitive organisms. Packs are of sixteen, 100 and 500.

Antacid and Anti-flatulent.—Mylanta and Mylocon are two new products by Parke, Davis & Co., Staines Road, Hounslow, Middlesex. Mylanta is claimed to be an effective antacid and antifatulent preparation containing magnesium hydroxide and aluminium hydroxide with activated methylpolysiloxane, a defoaming agent that breaks down the barrier of foamy mucus and enhances therapeutic action of the antacids. Mylanta tablets are in containers of 24 and 100, Mylanta liquid is in packs of 150 mls. and 360 mls. Mylocon, activated methylpolysiloxane, is indicated for the treatment of flatulence, functional gastric bloating and post-operative gas pains. It is also used before gastroscopy and radiography. By lowering the surface tension, Mylocon is said to effect a breakdown of the tiny gas bubbles of foamy mucus, liberating trapped gas for easier elimination. Packs are containers of 100 tablets and 30 mls. of drops.

Eye Drops.—Ciba Laboratories, Ltd., Horsham, Sussex, are making available on January 12 a new speciality, Ismelin eye drops, containing 5 per cent. of guanethidine sulphate antihypertensive agent in a specially formulated ophthalmic solution. The eye drops provide a new local treatment for the raised intra-ocular pressure that occurs in chronic simple glaucoma of the open-angle type, the makers claiming that effective control of the intra-ocular pressure is achieved with only one or two daily applications and that, the higher the initial intra-ocular pressure, the greater is the response to the product. Although some meiosis occurs, it is much less than with pilocarpine and accommodation is, it is understood, not affected. Ismelin eye drops produce "dramatic results" in the majority of exophthalmic patients by reducing the width of the palpebral fissure, with a corresponding improvement in appearance. The drops are presented in a glass-

dropper bottle of 5 mls provided with a special pipette that minimises the risk of overdosage.

Pain-relieving Gel.—For the relief of pain and discomfort in and around the mouth H. R. Napp, Ltd., Commerce Way, Lancing, Sussex, have produced Teejel, a transparent gel which is applied by finger to the painful area and massaged in gently every three to four hours as needed. The product is contraindicated if there is any history of salicylate sensitivity. The conditions for which it is intended include herpes labialis and herpetic lesions of the mouth; abrasions, ulcers and irritation of the gums, palate, cheek, tongue and lips; stomatitis, gingivitis and glossitis (especially glossitis following the administration of broad-spectrum antibiotics); lesions of the nasal mucosa; the introduction of new dentures (including immediate restoration), denture sores, abrasions and dental extractions; aphthous ulcers; angular cheilosis; traumatic ulcers of the lips; infant teething; mouth abrasions and ulcerations due to orthodontic appliances; traumatised post-operative tissues. Teejel contains 8.7 per cent. of choline salicylate and 0.01 per cent. of cetyl-dimethyl benzylammonium chloride. Pack is a 15-gm. sealed tube. The company's new pre-radiography purgative X-prep (see C. & D., January 6, p. 7) is chocolate flavoured and contains 2 mgm. per mil of sennosides A and B. Its pack is a bottle of 2½ fl. oz. (71 mls) [corrected note].

OVER-THE-COUNTER MEDICINALS

"Extra-strength" Pain Reliever.—Bristol-Myers Co., Ltd., Stonefield Way, South Ruislip, Middlesex, started their "sell-in" to chemists of Excedrin, claimed the first "extra-strength" pain reliever, on January 8 prior to national launch. Tablet for tablet, Excedrin is stated to contain 30 per cent. more pain-relieving ingredients than



"ordinary aspirin tablets. The formula includes aspirin, salicylamide, paracetamol and caffeine. Specifically developed for the relief of severe headaches, extra-strength Excedrin is claimed also an effective remedy for pains caused by neuralgia, cold and influenza symptoms and to relieve nerve and muscle aches, period pain and toothache. The product has been test-marketed for the past fifteen months in the Southern Television area, and market research has indicated that two out of five users of the product for the first time have bought a further supply. Containers are a pocket pack of twelve and a bottle of thirty-six tablets.

Correspondence

Letters when received must bear the name and address of the sender, not necessarily for publication. The Editor does not hold himself responsible for the views expressed.

Against the Levy

SIR,—I trust that members of the Society in general, and of the Council in particular, will make known, collectively and individually, their opposition to the rumoured reimposition of prescription charges ("a tax on the sick")—before the event, not after!

D.D.A.

Slow Seller

SIR,—With reference to letter re Placentubex (*C. & D.*, January 6, p. 12) I have always stocked this line, but I would say that the one I have at present has been displayed on my counter for over a year. Messrs. Harvey's efforts to create consumer demand do not seem to have reached my

pharmacy. It is obvious that if or when I sell this tube I shall not replace.

S. C. WITHERS,
Clacton-on-Sea, Essex

Historians Please Respond

SIR,—In the city of Havana there has just been established a Cuban Society of the History of Science and Technology, with the aim of carrying out a full programme of investigation in those fields. At the start of our activities we send greetings to all colleges and institutions concerned with the history of science and technology, with whom we would like to arrange an interchange of reviews, books and all types of publications.

DR. JOSE LOPEZ SANCHEZ, *President*,
Havana, Cuba

CODED TABLETS

SIR,—Enclosed is a duplicate letter written to the editor of *British Industry Week* after reading an article in that paper. There has been much criticism of the policies of the Pharmaceutical Society and the industry on the subject of coded drugs that I felt some reply was required. — R. J. WOODWARD, *B.Pharm., Ph.D., A.R.I.C., M.P.S., Cheam*,

YOUR article about coded tablets (November 24, 1967) presents several points which are misleading. The story of Co-tabs and the comparative ease of manufacturing stamped tablets are correct but the reason for the apparent failure of coded tablets to sell can be traced to the policies of the originators of the system. In your article the originators appear as an injured party whose philanthropic ideas have been thrown over by a wicked pharmaceutical industry and the Pharmaceutical Society. But if the Society and the pharmaceutical industry had not reacted against the Co-tab system then the originators of the code would have gained a monopoly of the standard tablet market overnight because they owned the trade mark Co-tab. In the initial launch period the originators told everyone that the code was available to all manufacturers but the advertisements always indicated that the word Co-tab was a trade mark with no free use to all!

Potential "Babel"

Sales of the coded tablets are actively promoted under the brand name Co-tab and prescriptions must be written thus:—Co-tab phenobarbitone 30 mgm. instead of the standard tablet prescription which would read as:—

Tab. phenobarbitone 30 mgm.
If any other manufacturer adopted the code he would have to register a trade mark and promote his identical coded tablets against those of the originators. The result of such action even by one or two manufacturers of standard tablets would be chaos for all those involved in prescribing, distributing and dispensing such medicines. The additional cost of such preparations would be much greater than the normal standard formulary tablet which is the product always being praised for its cheap-

ness by the Ministry of Health when compared with the branded drug, much of the price increase would be attributable to sales promotion and not to actual production costs. Adopting the code for tablets without a brand name would be pointless because Co-tabs will always be associated with such coded tablets and doctors are certain to prescribe them under that prefix—after all, that trade mark is the ideal one for those products.

In my opinion it is absolutely right for the Pharmaceutical Society and the industry to insist upon a universal coding system for tablets, capsules, coated tablets and pills. The announcement in late 1967 of the setting up of a working party on this subject, drawn from all sections concerned with its development, was good news. The cost of tooling machinery to produce coded tablets is about twice as much as that required for plain tablets. The tooling for plain tablets will make a host of different ones of that particular diameter but a coded set of punches for the Co-tab system will make only one kind of tablet. Thus the cost of tooling for coding is not twice as much for plain tablets but almost infinitely greater! The present technology for production of coded tablets is fairly simple, but I believe there may be better ways of marking tablets than stamping them during compression. It may be that the delays that have already occurred will lead to a new technique for marking tablets that will be really satisfactory. Since there is a significant international trade in solid-dosage pharmaceutical preparations it might be advisable to consult international bodies before proceeding with statutory coding in this country. Any further unilateral action can only add to the chaos, so please give the new working party time to sort out this really complex problem.

Nuances

SIR,—It was interesting to note the view of Mr. C. C. Stevens in your publication (*C. & D.*, December 23/30, 1967, p. 586). No doubt the English-speaking world will read with surprise the information that the English language is not an official language. The important point here, however, is this: that the official publication by H.M.S.O. printed March 25, 1957, carries a *nota bene* saying that the translation of this vital document cannot be treated either as an official or an authentic text because the official and authentic texts are only in French, German, Italian or Dutch. Anyone with a knowledge of languages would be compelled to agree that the faintest nuances in official translations in a document of this character could have sweeping repercussions. I believe it should be a matter for detailed examination and debate in the British Parliament before any moves should be made for reopening discussions on Britain joining the E.E.C.

WILLIAM MOLLOY, *M.P.*,
House of Commons

[Mr. Molloy seems to be reinforcing some of the very points Mr. Stevens was making. In the context of the letter it was obvious that "an official language" implied "of the Common Market," especially when followed by "as yet." Study of the situation should go ahead on such information as is available even if the *nuances* must ultimately depend on an "official" English rendering of the treaty of Rome.—EDITOR].

International Pharmacy

SIR,—The following is an abstract of a letter being sent to all secretaries of branches of the Pharmaceutical Society to draw attention to the International Pharmaceutical Federation:—

We are endeavouring to increase the number of British associate members of the *Fédération Internationale Pharmaceutique* (F.I.P.). In spite of the fact that the Pharmaceutical Society of Great Britain is the largest pharmaceutical society in the world it has fewer associate members than France, Holland or the United States, and only a few more than Belgium. Some of the privileges of associate membership of F.I.P. are:—

1. Opportunities to influence and mould the international policy of the forty-five national pharmaceutical organisations which are affiliated to the Federation.
2. The receipt of information about the annual meetings of the Federation and a personal invitation to take part in these meetings.
3. Membership of sections of F.I.P. — Scientific Hospital Pharmacists, Military Pharmacists, Medicinal Plants, Press and Documentation, and Industrial Pharmacists'. Associate members may also attend open meetings of the Commission for the General Practice of Pharmacy, the Committee of Directors of Control Laboratories, and

the Committee of Pharmacopeia Secretaries, and make known their views on the subjects dealt with by these committees.

4. The receipt of a quarterly bulletin from the F.I.P. headquarters and of the official F.I.P. journal, the *Journal Mondial de Pharmacie*.
5. The receipt every two years of a world wide list of F.I.P. members and associate members with their addresses.

Most important is a chance of seeing something of the wide world of pharmacy through an international outlook. To facilitate admission as an associate member of F.I.P. I enclose some enrolment forms which should be completed and returned with the remittance of 35s. (15 D.F.I.) to Mr. F. W. Penson, who is responsible for collecting subscriptions from U.K. members. Subscriptions are for the calendar year (in this case 1968) and become effective immediately. If any member wishes, and subject to copies being available, a specimen of the *Journal Mondial de Pharmacie* could be forwarded.

W. K. FITCH,
17 Bloomsbury Square,
London, W.C.1

Predictions

SIR,—Herewith Old Mugwump's Almanack for 1968...

JANUARY

Health Minister promises retention of free Health Service.

FEBRUARY

Florin prescription charge reimposed, Pharmaceutical Society takes over British Museum.

MARCH

Biggest trade gap since Armada, Chemists' oncost increased to 33 per cent. France agrees to Britain's Market application.

APRIL

Germany, Italy, Belgium and Holland veto Britain's Market application. Budget postponed while "sacred cows" are examined for foot and mouth disease. Salaried Pharmacists' Union affiliates with Trades Union Congress.

MAY

Brian Inglis elected president of Association of British Pharmaceutical Industries. Prescription charge increased to 5/-.

JUNE

Biggest trade gap since 1066.

JULY

"Xrayser" denounced as Russian spy. Marihuana legalised and bicarbonate of soda made Schedule 4. Trade gap statistics lost in post.

AUGUST

Chemists Federation re-formed with manufacturers of Aspro, Alka-Seltzer and Beechams as founder-members.

SEPTEMBER

NPU markets "chemists-only" nylons. Germany, Italy, Belgium and Holland agree to Britain's E.E.C. application.

OCTOBER

Luxembourg vetoes Britain's Market application.

NOVEMBER

Prescription charge raised to a guinea.

DECEMBER

Chemists' oncost increased to 1,000 per cent. Death penalty introduced for rota-breaking.

MUGWUMP-159

Appeal for Medical Supplies

SIR,—A few months ago a doctor from Witney, Oxon, decided to give up his practice in the town for twelve months and offer his services to the Shining Hospital, Pokhara, Nepal, a mission hospital staffed by four doctors and about twenty nurses, and providing the entire medical aid to about 2 million persons. Before he left for Pokhara the doctor appealed to many

pharmaceutical firms for medical supplies to take with him in order to relieve some of the suffering he would find. The response was overwhelming and as a result of the generosity of those firms a great quantity of drugs was collected. The Rotary Club of Witney helped financially with the cost of transporting a large portion of those supplies to Nepal, and they arrived safely. The Club intend now to send a lorry overland to Nepal loaded with bedding, clothing, medical supplies, etc., and have enlisted the help of Rotary Clubs in the countries between here and Nepal to assist the vehicle in its passage over the many frontiers. May I, Sir, have space in your columns to ask if there are any pharmaceutical or surgical instrument manufacturers who would be willing to help us in this venture by supplying drugs or equipment either as a gift or at reasonable cost? Virtually anything will be welcomed and the club will undertake to see that it gets to its proper destination. Two items we are particularly looking for are an autoclave for use with kerosene to take two 9 x 9-in. drums and an electric autoclave to take two drums 15 x 10 in. I will be pleased to accept any items or correspondence on behalf of the Rotary Club at home or at my business address, 2 High Street, Witney.

J. S. MEDLEY, M.P.S.,
65 Woodstock Road,
Witney, Oxon

Tautology?

SIR,—Your comments on the underlined portion of the enclosed advertisement cut from the current *C. & D.*, would be welcome. Could someone tell the Ministry of Health officials what a pharmacist is?

HAJOLLEY

[The advertisement states, under "Qualifications," "must be Registered Pharmaceutical Chemists . . . A degree or equivalent qualification in pharmacy an advantage." For those now coming on to the Register the qualification is the equivalent of a degree, but many pharmacists were registered under an earlier *régime* after an examination that is generally recognised as being below degree standard. — EDITOR.]

Appreciated

THE *C. & D.* has always been of great service to me during the past fifty years.—E.P. (Denbighs).

WHILST I have been in business the *C. & D.* has been most interesting, informative and the Quarterly Price List invaluable in keeping up with prices. Many thanks.—T.A.

We would take this opportunity of saying how useful we find the price list and its weekly alteration sheet. In these days regular use of same makes for easier working in keeping abreast of rising prices.—A.S.

Poser Solution

CORRECT rendering of the prescription shown last week was:—

Ammon chlor gr v
Elix Diphenhydramine ad dr.ii
M. 6 oz Sig dr ii q. q. h.
ex aq cal.

BRANCH EVENTS

SWANSEA AND W. GLAMORGAN Twenty-third time Lucky

A DECISION to change the venue of their annual ball by Swansea and West Glamorgan Branch of the Pharmaceutical Society after holding twenty-two successive functions at the Brangwyn Hall, Swansea, between 1945 and 1966, is reported to have been more than justified. When the fortieth annual ball of the Branch was held at the Top Rank Suite, Swansea, recently (chief guest Mr. Albert Howells, vice-president of the Society), 511 members and guests were present. A profit of over £170 accrued to the Branch charity fund. Most of the fund eventually goes to the Society's Benevolent Fund. Corresponding amount in 1945 was £29.

PLYMOUTH

Poisoning and porcelain

AN overflow meeting of Plymouth Branch of the Pharmaceutical Society and the local divisions of the British Medical Association resulted from a visit by Professor F. Camps recently. Attendance was over 300. DR. COHEN (chairman, Plymouth Division, B.M.A.) opened the meeting and Mr. L. W. J. Simpson (chairman, Plymouth Branch, Pharmaceutical Society) introduced the speaker. Professor Camps illustrated his lecture "Poisoning: Accident, Suicide or Murder?" with slides describing many cases of crime detection and posed the problems of drug addiction and teenagers today. He considered there should be no slacking of control on cannabis and said that much more research should be done on addiction. At the pre-Christmas meeting of the Society's Branch, MR. A. G. M. MADGE, (a member of Council) gave an exposition of the White Paper on future medicines legislation, its likely effects, and the views of the Council. MR. D. HAWKINS gave a display of conjuring and sleight of hand. MR. GEORGE GORMAN (Clerk, Plymouth Executive Council) presented anecdotes and humorous letters and MR. E. BURROWS (Branch historian) gave an address on "Cookworthy, Quaker, Scholar, Citizen, Pharmacist." Cookworthy was born at Kingsbridge near Plymouth in 1705, and founded the pharmacy of Bevan & Cookworthy. Noticing that the deposit of the kaolin in Cornwall was similar to those of the Far East, he experimented and after many disappointments, succeeded in producing the first English porcelain.

WORLD TRADE

Ghana: Pact Repeal Sought.—The Government of Ghana announced on January 5 that it had been asked by Abbott Laboratories, of Chicago, U.S.A., to abrogate the agreement under which Abbott was to have become a partner in the state pharmaceutical corporation (see *C. & D.*, September 2, 1967, p. 219). The American company states that it is seeking termination of the agreement "in view of the nature of criticisms of the project in the Press and by certain individuals."



CHEMIST AND DRUGGIST

For Retailer, Wholesaler and Manufacturer

ESTABLISHED 1859

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TELEPHONE: 01-353 6565

A Pilot Through the Price "Rapids"

RECENT intense activity by manufacturers in reviewing the price structures of their products is reflected in the exceptional number of price changes listed in this week's Cumulative Price Changes supplement. Only when changes have been made by the Chancellor in purchase tax rates have there been more numerous entries under "This Week's Changes."

In the current list 178 items of thirty-two manufacturers are advanced in price, and fifty-eight items represent new products or packs. In addition one manufacturer (Elizabeth Arden, Ltd.) has increased the prices of no less than 292 items and added three new items.

The increases lie generally as one would expect, amongst the cosmetics and toiletries and apparently reflect the replacement costs of imported raw materials following devaluation. However, it would appear that many manufacturers whose production costs are not primarily affected by the cost of imported materials are also finding it difficult to contain prices in the face of increasing National Insurance contributions and the cancellation by the Government of the selective employment tax rebates. Increased bank-rate charges, together with industrial training levies, redundancy payments and corporation tax must inevitably have some effect, especially in those areas in which competition is already extreme and in which efficient production methods already operate.

It is worthy of note, in the circumstances, that most of the fifteen items for which reduced prices are announced this week come within the classification "ethical pharmaceutical preparations." That is a point that should not go unnoticed by those who have in recent months been strongly criticising the pharmaceutical industry for the prices of its products used within the National Health Service.

Nobody can continue to believe, in view of the spate of price changes, that retailing is a simple procedure or one in which price fluctuations do not have to be closely studied and applied. Every change in a retail price, prompted as it usually is by a change in the manufacturer's price to the stockist, has its effect on the possible market for the item concerned. It necessitates a re-assessment of its potential sales by all who buy to sell again. As the economic squeeze develops, changes are also likely to take place in buying habits and fashions, making the problems of stock choice and

stock levels ever more complicated and exacting. The retailer needs always (and now more than ever) to apply the whole of his wisdom and experience in order to exist in the climate of competition — competition, moreover, not solely from those in his own category but from traders dealing in other classes of goods. In that situation the value of the C. & D. Quarterly Price List and its unique weekly price supplement as aids to successful retailing can hardly be overstressed, and supporting evidence comes from the many appreciative letters we continue to receive from subscribers, confirming that many would find general-practice pharmacy a nightmare without the comprehensive, up-to-date and readily accessible information those sources provide. At a time when productivity is so much the prevailing topic, the Q.P.L. is a "must."

Insuring Cheques

ONE way out of the problem of providing some form of credit to customers is to encourage the use of cheques by accepting all cheques that are offered, regardless of whether they are supported by a bank's guarantee. The way in which that can be done without any risk is to insure all cheques. Admittedly the cost of the premium will have to be met, but in some circumstances the increase in goodwill can be substantial. And there will be, of course, neither lost business due to the reluctance to accept cheques nor losses in the form of cheques that bounce. When cheques are insured on this basis, notices can be put up in the shop to say that all cheques will be accepted. That in itself is a useful form of advertisement.

The principle behind this rather unusual form of insurance is that a fixed annual premium is paid so that the cost of the service is known in advance. The method provides cover up to a certain limit for all cheques that may be handled during the year — irrespective of their number.

To quote premiums precisely is impossible since clearly they vary according to the size of the business and the locality. The passing of dud cheques is encountered much more often in large cities than in comparatively small provincial towns, and the insurers take that into account when assessing premiums. What can be said is that the premium is likely to be much less than the face value of dud cheques accepted.

The principle behind this kind of insurance is simple enough. When a cheque is returned from one's bankers it is sent, together with a claim form, to the insurers. Provided the cheque falls within the agreed limit, the insurers pay its full face value without any deductions.

With this insurance in force there is nothing to prevent one from accepting cheques over the agreed limit. In that event, however, one can only expect to receive from the insurers as of right, if such a cheque should bounce, the agreed limit. Nevertheless the insurers will then put in hand the recovery from the customer. If they are successful and the recovery rate is high, since the operation is countrywide, the balance, over and above the limit, is returned to the insurer — less a collecting commission of 15 per cent. or so.

The reason why it can pay to insure rather than to take a chance and try to make one's own recoveries (thereby saving the cost of the insurers' profit) is that the insurers are expert and efficient at making recoveries. They have their own legal department engaged solely

on that work. Not only can they undertake it more cheaply but, since they are virtually a clearing-house for dud cheques, often working in close co-operation with the police, the chances are that they are likely to be more successful.

Nevertheless the insurers make the point that they do not adopt tough tactics with a *bone fide* customer who is suffering from temporary financial embarrassment, or who misjudged when the next salary cheque would be credited. Such customers are treated courteously, so that their custom is not lost for the future.

"OPEN SHOP"

By E. C. TENNER

IT is remarkable how some people can find jobs for others to do. I came across a good instance of this in my paper a few days ago. Briefly a certain reverend gentleman, anxious about the current prevalence of drug taking, had decided that it would help if the Ministry of Health had really up-to-the-minute information about all D.D.A. prescriptions issued. His method of achieving that purpose was for all retail pharmacists to be supplied with special forms to be filled in each evening with details of all the D.D.A. prescriptions they had dispensed during the day. These forms were to be posted the same night, and the information collated the next day by a newly appointed batch of civil servants. Let me assure the reverend gentleman that, if he wishes to have my day's prescriptions sorted the same evening, the D.D.A.'s extracted and copied out on his form, then so far as I am concerned he would be the best person to do the job.

Good Wishes to the Society's Secretary

I was more than pleased to see our new secretary of the Pharmaceutical Society featured in "Figures in the Pharmaceutical World." Since his appointment I have had the pleasure of meeting Mr. Lewis on a number of occasions of both a social and an official nature. I have been most impressed by his attitude and his courtesy and would take this opportunity of wishing him many happy and useful years of office. I would assure all my colleagues that, if they ever have the opportunity of meeting him, the pleasure will be theirs.

Problems of "Redundant" Pharmacists—and of All

My colleague Xrayser poses some of the problems that would follow a considerable fall in the number of registered pharmacists. One of his points was the resulting hardship to many who would no longer be able to sell their businesses. Many years ago I raised this point of hardship in a letter which I addressed to the C. & D., though I was then writing on the subject of a planned distribution of pharmacies, with particular regard to a possible closure of some shops in districts where there was an excess. I then gave it as my opinion that there should be some form of compulsory turnover levy to buy out such businesses. I still feel that this is a reasonable and humanitarian solution to Xrayser's problem — a problem that is perhaps more imminent than many realise, for I have little doubt that the next ten years are bound to see a considerable fall in our numbers. I also agree that this will be no bad thing if it results in there being sufficient professional work to keep us all busy without our having to resort to the — to me — somewhat undignified selling of lipsticks, etc., to keep the door open and the staff paid. One question that arises as I write this is, of course, whether there is ever to be any real hope of a continuity of professional work for us. It would appear that we are in grave danger of being faced with yet another "stop" in the "stop-go" sequence that has characterised professional general-practice pharmacy for the past twenty years. One is rightly given to wonder whether,

if the prescription charges are reimposed and there is any significant fall in numbers, the remuneration adjustments will be quickly made in the reverse direction. One understands that the principal reason for the adjustments was that, by virtue of the fact that many of us nearly killed ourselves in the process, we coped with considerable extra work without a proportionate increase in our staff. Did the Ministry think that extra staff grow on trees? Probably by now many of us have taken on and trained more staff, and are likely to see the time spent on training them completely wasted, and to be faced with the distasteful task of telling the staff that they are no longer needed. Will governments never realise that, in dealing with pharmacy, they are actually dealing with human beings and that, if we are to continue to give good service to the community, we cannot be endlessly subjected to this "stop-go" existence.

Advantages of Buying Groups

"The day the last wholesaler closed," has been the theme of quite a series of advertisements in the pharmaceutical Press of recent years. Were the wholesalers crying before they were hurt, or has their campaign been extraordinarily successful? I pose these questions because I have just noted that, according to Nielsen, there has been a quite remarkable increase in the percentage of the pharmacist's stock which he obtains from the wholesalers — an increase of no less than 20 per cent. in the past four years. Would it not be wonderful if we could think up a similarly successful advertising campaign to encourage the general public to increase their purchases from pharmacies on a similar scale? I have little doubt that the wholesalers' campaign was sparked off by the emergence of the buying group amongst retail pharmacists. Locally we have had such a group on a properly organised scale for about six years. Apart from its profitability, I feel that the group has been of inestimable value for the really comradely spirit it has fostered amongst us. Possibly our own group is rather on the small side compared with some of the really ambitious organisations of which one hears, for only six of us are concerned in it. However, we find that it enables us to buy the majority of our requirements on very good terms, creates no extra overheads whatever and — most important — we have no bad payers. Indeed it is quite normal for all our monthly contra accounts to be settled before we have to meet our own bills for the goods.

NEW BOOKS

Chemists and the Law

F. A. ROBINSON and F. A. AMIES. *E. & F. N. Spon, Ltd.*
11 New Fetter Lane, London, E.C.4. 8 x 5½ in. Pp. 231.
40s.

THE hope is expressed in the foreword that this book "will come to be regarded as a standard text to which all chemists will turn." There is also a general definition of the term "chemists" "as being holders of a recognised qualification in some branch of chemistry who are, for the most part, members of one or more of the established societies or associations such as the Chemical Society, the Society of Chemical Industry, the Royal Institute of Chemistry, the Pharmaceutical Society, the Biochemical Society, the Society for Analytical Chemistry." The authors have therefore dealt with a broader range of the legislation than is usually to be found on forensic pharmacy. The law relating to contracts, negligence, nuisance, patents and copyright is given, usually in sufficient detail to enable the reader to answer most of the general problems. For those who want more detailed information the authors have included a bibliography at the end of each chapter and tables of Statutory Rules and Orders. There is a short but useful introduction on the British legal system that helps to set the background to the remaining chapters and, where the law in Scotland and Northern Ireland is not the same as in England and Wales, that is stated. Pharmacists, however, will find neither detailed examples on labelling nor the answers to the hospital pharmacists' special problems. Those whose legal problems range over wider fields will find this book an asset.

NATIONAL PHARMACEUTICAL UNION

Matters Before the Executive Committee

WHEN the N.P.U. Executive Committee met in London on November 29, 1967, MR. H. G. MOSS (chairman) reminded the Committee how important it was to support the case for the preservation of maintained prices for medicines. All members should be made aware that they would be asked for some contribution to the fight, and that it would be a case of "now or never."

Once lost, the situation would not be restored. Apart from hard cash it would be necessary to obtain a great deal of information. For that, a statistical sample of pharmacists would, as with the investigation into N.H.S. costs, be selected and asked to provide data about their business. After full discussion it was agreed to mount a pilot inquiry and make preparations for an appeal to members.

The Committee considered a request from the Monopolies Commission for information about chemists' prices for goods not subject to resale price maintenance. The Commission had indicated that it was investigating the general effect on the public interest of the practice of recommending "or otherwise suggesting" prices to be charged on the resale of goods.

A document was received which set out the views of the Decimal Currency Board on how the legal and practical situations that would arise in the weeks immediately following "Decimal Day" might be dealt with, particularly those relating to cash transactions during the change-over.

The Committee considered correspondence about the setting-up of a British Medical Association working party on mechanical aids for the disabled, including a suggestion that the existence of such aids should be publicised through members' pharmacies. The Committee felt that the present supply arrangements were reasonably adequate and that there was little evidence that disabled people were finding difficulty in obtaining suitable apparatus from existing sources.

Breath-testing Appliances

Approval was expressed of the manufacturers' action in limiting the distribution of Alcotest to pharmacists, and the Committee noted that advice about sales had been published. The Committee decided to make no general comment otherwise than to endorse the view that the sale of breath-testing apparatus to the public was a matter for the individual conscience of the members concerned.

Mr. H. G. MOSS presented the report of the General Practice Advisory Committee upon the Pharmaceutical Society's provisional comments on the proposals in the White Paper on Medicines Legislation. The Executive Committee agreed, in the main, with the provisional comments, but could not accept that "the use of the term 'chemist' or any other restricted term in the title of a body corporate should be prohibited." That was contrary to N.P.U. policy. Pharmacists with "com-

mon" names were having increasing difficulty in registering business titles without the use of "Chemist" or "Pharmacy" as part of the title. It would be wrong to encourage the use of unsuitable alternatives such as "Medicines" or "Pharmaceutics" in titles as a way round the prohibition. Clarification would be sought about the inclusion of a number of phrases and terms in the Society's provisional comments that required definition in the Executive's view before their possible effect on N.P.U. members could be assessed. The Executive Committee believed that the "general licence" for dispensing in retail pharmacies should include the "breaking of bulk" between a member's branch pharmacies and the supply of dispensed preparations from one pharmacy to another.

Arrangements for Training

MR. H. B. COULSON (chairman of the training subcommittee) in his report made recommendations about future management meetings for members. Visits to technical colleges in Bradford, Hitchin and Merthyr Tydfil by the secretary of the Pharmaceutical Assistants' Training Board (Mr. E. J. Downing) had been undertaken during the month to provide information about the new training courses for pharmacy assistants to assist the colleges in future planning. Discussions between the Board, representatives of the Pharmaceutical Society and Guild of Public Pharmacists, and the City and Guilds of London Institute had been held during the month, and good progress was being made in formulating the syllabuses for discussion and agreeing upon entrance requirements.

MR. J. REED reported upon the successful establishment of four Scottish Pharmaceutical Federation / National Pharmaceutical Union branches in Scotland at Aberdeen, Edinburgh, Glasgow and Perth.

MR. H. B. COULSON, presenting the report of the Publications Committee, referred to the successful introduction of the new *Family Doctor* booklets scheme. The Committee had studied the new accounting and stock-control facilities provided by computer-linked cash registers, and the office would be preparing reports for members following meetings with the manufacturers concerned. The possibility of offering to members an adding machine suitable for dual-currency working was considered and the suggestion agreed in principle. Notes of guidance for manufacturers on the design and format of invoices and credit notes were examined and suggested ways of securing appropriate publicity approved.

MR. W. TALVAN REES (chairman of the Marketing Committee) warned about the possible effects of devaluation on manufacturers' costs, which inevitably would be reflected in the prices of N.P.U. products. Final plans for the announcement of the 1968 toothbrush offer were agreed, as was the launch on January 1 of a rose-hip syrup. A number of other new promo-

tions for 1968 were approved. Supplies of counter bags carrying new designs would shortly be available.

N.H.S. Matters

Reporting upon matters discussed during a meeting of Central N.H.S. Committee on the previous day, MR. G. T. M. DAVID referred to progress made in discussions on remuneration. All the profit-and-loss accounts for the pharmacies taking part in the 1966 inquiry had now been received, and the final figures were being collated. Arrangements were in hand for a meeting early in January between representatives of the Committee, with their consultants, and the Ministry on matters relating to the inquiry, including the notional salary for proprietor pharmacists. An interim reply from the Ministry indicated that the representations about the dispensing of tablets and capsules in glass or plastic containers in relation to the container allowance were under consideration. There had been a further exchange of correspondence concerning the Committee's claim for an "out-of-hours" call fee. It was agreed to call a further meeting between representatives of the Committee and of the Society's Council on *nomen proprium* labelling. Following a meeting with members of the oxygen subcommittee and the Ministry, a claim for increased remuneration in respect of the oxygen therapy service had been submitted. The latest representation to the Minister of Health about delays in reaching agreement about the problem of dispensing doctors in rural areas had brought from Mr. Kenneth Robinson the reply: "I am sorry that this matter is taking such a long time. The position is that I am still waiting for the British Medical Association to present their views to me. I gather that we can expect to be hearing from them soon, and after that I hope that it will be possible to make progress. As I said in my earlier letter to you, we shall not forget our commitment to let you know as soon as further discussions can usefully be undertaken." A Pharmaceutical Committee had approached the Central Committee about the recommendation in the N.P.U. policy statement that the *Prescribers Journal* was a suitable source of technical information about drugs and therapeutics. Could it assist in facilitating the distribution of that publication to contractors? It was agreed to make appropriate representations to the Ministry of Health. The Committee had considered proposals about the writing and dispensing of prescriptions after the change-over to the metric system in early 1969. Reservations were expressed about the proposed introduction of a 10-mil plastic dose measure as a companion to the 5-mil spoon, for medicines due to be reformulated from a tablespoon to a 10-mil dose. Patients were becoming accustomed to the 5-mil spoon, and the introduction of a further metric measuring device could, it was thought, cause confusion.

GUIDE TO NEW MEDICAMENTS

Information about proprietary products supplied principally on prescription. Reprints on perforated gummed paper for affixing to index cards are obtainable from the Editor. Notes on the products are given on p. 43.

THE CHEMIST AND DRUGGIST Guide to New Medicaments, Jan. 13, 1968

ARADOLENE analgesic cream

MANUFACTURER: Radiol Chemicals, Ltd., Stepfield, Witham, Essex. DISTRIBUTOR in Scotland, Donald Macaulay, Ltd., 22 King Street, Trongate, Glasgow, C.1; in Northern Ireland, R. J. Groves & Son, 54 Great Victoria Street, Belfast.

DESCRIPTION: Analgesic cream containing 5 per cent. of diethylamine salicylate, 0.4 per cent. of capsicum oleoresin, 1.4 per cent. of rectified oil of camphor and 2.5 per cent. of menthol in an absorbent base.

INDICATIONS: Acute rheumatic conditions, sciatica, lumbago, fibrositis, muscular trauma, strained tendons and ligaments, unbroken chilblains.

CONTRAINDICATIONS: Skin abrasions, sores.

METHOD OF USE: Should be applied to the affected area, the surrounding tissue and the muscle involved, and massaged thoroughly until absorbed.

PACK: Tube of 40 gm. FIRST ISSUED: January 1968.

THE CHEMIST AND DRUGGIST Guide to New Medicaments, Jan. 13, 1968

EFCORTESOL injection

MANUFACTURER: Glaxo Laboratories, Ltd., Greenford, Middlesex.

DESCRIPTION: A ready-prepared solution of hydrocortisone sodium phosphate containing a stabiliser and suitable buffers. Each 1-ml ampoule contains 100 mgm. of hydrocortisone as the 21-disodium phosphate ester.

INDICATIONS: Acute adrenal insufficiency, which may occur after adrenalectomy or in Addison's disease; severe shock caused by trauma or overwhelming infection; intense allergic reactions such as status asthmaticus and anaphylaxis.

NOTES: Use of hydrocortisone is likely to increase the efficacy of other treatment in shock but does not replace other measures.

DOSAGE: Usually 100 mgm. of hydrocortisone by intravenous injection or infusion, or by intramuscular injection. The dose may be varied according to the patient's response and the condition. In shock associated with severe infection and other illness, 500 mgm. or more may sometimes be given during twenty-four hours.

PRECAUTIONS: Transient high levels of hydrocortisone involve no serious risk of side effects but with continued use the customary precautions are needed.

SHELF LIFE: Eighteen months at temperatures not exceeding 30°C. Two years at temperatures not exceeding 20°C.

PACK: Box of six 1-ml ampoules.

SUPPLY RESTRICTIONS: Therapeutic Substances Act.

FIRST ISSUED: November 1967.

THE CHEMIST AND DRUGGIST Guide to New Medicaments, Jan. 13, 1968

ALUPENT-SED tablets

MANUFACTURER: Boehringer Ingelheim, Ltd., Isleworth House, Great West Road, Isleworth, Middlesex. DISTRIBUTOR: Geigy (U.K.), Ltd., Pharmaceuticals Division, Roundthorn Industrial Estate, Wythenshawe, Manchester, 23.

DESCRIPTION: White, uncoated tablets marked At/S and scored on one side, and the company symbol on the other. Each tablet contains 20 mgm. of orciprenaline sulphate and 20 mgm. of amylobarbitone.

INDICATIONS: Prevention of wheezing in the anxious asthmatic patient or the bronchitic patient who has been subjected to chronic distress.

CONTRAINDICATIONS: Thyrotoxicosis. Should not be given to patients who have a known idiosyncrasy to barbiturates, or a condition in which barbiturates are contraindicated.

DOSAGE: *Adults*: One tablet four times daily. *Children* (6-12 years): half a tablet three or four times a day.

PRECAUTIONS: Care should be exercised if it is proposed to administer a monoamine-oxidase inhibitor concurrently.

SIDE EFFECTS: Mild sympathomimetic-type side effects such as palpitation, tremor, or tachycardia may occur but are usually transient and seldom necessitate interruption of treatment. Drowsiness should not present a problem.

PACKS: Containers of fifty and 250.

SUPPLY RESTRICTIONS: P.I., S.I., S.4A.

FIRST ISSUED: November 1967.

PLACING ON C. & D. TABLET AND CAPSULE IDENTIFICATION GUIDE:

White, 14/32, P, R, F/F, B2, 393/371.

THE CHEMIST AND DRUGGIST Guide to New Medicaments, Jan. 13, 1968

BRISTREX syrup

MANUFACTURER: Bristol Laboratories, Ltd.; Astronaut House, Hounslow Road, Feltham, Middlesex.

DESCRIPTION: Syrup containing tetracycline (phosphate buffered) equivalent to 125 mgm. of tetracycline activity and 125,000 units of nystatin in each 5 mls.

INDICATIONS: Infections due to tetracycline-sensitive organisms, particularly where gastro-intestinal side effects may be a problem.

CONTRAINDICATIONS: Serious hypersensitivity to the antibiotics.

DOSAGE: *Adults*: 1 gm. daily in four divided doses. *Children*: 25 mgm. per kilo body weight in four divided doses. (Dosage based on tetracycline content.)

PRECAUTIONS: Caution is advised during the period of tooth development as discolouration of the teeth is occasionally reported following the use of tetracyclines. Therapy should be continued for twenty-four to forty-eight hours after the patient has become asymptomatic or afebrile.

SHELF LIFE: Two years. PACK: Bottle of 60 mls.

SUPPLY RESTRICTIONS: Therapeutic Substances Act.

FIRST ISSUED: November 1967.

THE CHEMIST AND DRUGGIST Guide to New Medicaments, Jan. 13, 1968

MAGMILOR tablets and pessaries

MANUFACTURER: Calmic, Ltd., Crewe Hall, Crewe, Ches.

DESCRIPTION: White, sugar-coated tablets with yellow core, each containing 200 mgm. of nifuratel. Yellow, flat, torpedo-shaped, effervescent vaginal pessaries each containing 250 mgm. of nifuratel.

INDICATIONS: Treatment of leucorrhoea and vulvovaginitis of trichomonal origin. Oral therapy to the male partner assists in preventing re-infection.

CONTRAINDICATIONS: As an added precaution in pregnancy, treatment should be restricted to local therapy with pessaries.

DOSAGE AND METHOD OF USE: One tablet should be taken three times daily for seven successive days. One pessary should be inserted on ten successive nights.

PRECAUTIONS: Although intolerance phenomena are mild and rare, patients are advised to refrain from taking alcohol during treatment.

STORAGE: Should be stored in a cool dry place and protected from light.

PACKS: Treatment packs of twenty-one tablets and ten pessaries.

Tablets also in pack of twenty-one, pessaries in pack of ten.

FIRST ISSUED: October, 1967.

PLACING ON C. & D. TABLET AND CAPSULE IDENTIFICATION GUIDE:

Tablets: White, 13/32, C, R, Cv/Cv, —, —.

Pessaries: B3, 41/32, P, 397, F/F, B2, —.

THE CHEMIST AND DRUGGIST Guide to New Medicaments, Jan. 13, 1968

PARAMOL-118 tablets

MANUFACTURER: Duncan, Flockhart & Evans, Ltd., Birkbeck Street, London, E.2.

DESCRIPTION: White, compressed tablets, one side plain, the other stamped DFE/P each containing 500 mgm. of paracetamol and 10 mgm. of dihydrocodeine bitartrate (DF. 118).

INDICATIONS: Headache, neuralgia, dysmenorrhoea, dental pain, back pain, fibrositis, trauma and post-herpetic neuralgia. Long-term management of rheumatic pain in patients who cannot take aspirin.

CONTRAINDICATIONS: Should be administered with caution to patients with marked impairment of liver function or advanced kidney disease. Should be given with caution to patients with allergic disorders and should not be given during an attack of asthma.

DOSAGE: *Adults and children over 12 years*, two tablets every four hours taken, if possible, after a meal.

SIDE EFFECTS: The only side effect of note is constipation which may be treated with a mild laxative and tends to become less or disappear with continued use.

STORAGE: Should be stored in a cool, dry place.

PACKS: Containers of twenty-five, 100 and 250 tablets.

SUPPLY RESTRICTIONS: P.I., S.I., D.D.A. (invoice only).

FIRST ISSUED: November 1967.

PLACING ON C. & D. TABLET AND CAPSULE IDENTIFICATION GUIDE:

White, 16/32, P, R, F/F, B2, 394/—.

THE CHEMIST AND DRUGGIST Guide to New Medicaments, Jan. 13, 1968

DULCODOS tablets

MANUFACTURER: Boehringer Ingelheim, Ltd., Isleworth House, Great West Road, Isleworth, Middlesex. DISTRIBUTOR: Geigy (U.K.), Ltd., Pharmaceuticals Division, Roundthorn Industrial Estate, Wythenshawe, Manchester, 23.

DESCRIPTION: White, enteric sugar-coated tablets overprinted with the company symbol. Each contains 5 mgm. of bisacodyl and 100 mgm. of dioctyl sodium sulphosuccinate.

INDICATIONS: Treatment of constipation, particularly in the geriatric patient with inspissated faeces.

CONTRAINDICATIONS: Conditions in which any aperient is contraindicated.

DOSAGE: One or two tablets at night.

NOTES: Because the tablets are enteric coated they should not be taken within one hour of antacid preparations.

PACKS: Cartons of twenty and 200. The tablets are blister packed in strips of ten.

FIRST ISSUED: November 1967.

PLACING ON C. & D. TABLET AND CAPSULE IDENTIFICATION GUIDE: White, 15/32, C, R, Cv/Cv, —, 371/371.

THE CHEMIST AND DRUGGIST Guide to New Medicaments, Jan. 13, 1968

DUVADILAN tablets and injection

MANUFACTURER: Crookes Laboratories, Ltd., Basingstoke, Hants.

DESCRIPTION: White tablets, scored on one side with the word "Duvadilan," each containing 10 mgm. of isoxsuprine hydrochloride. Orange tablets, scored on one side with the word "Duvadilan" each containing 20 mgm. of isoxsuprine hydrochloride. Injection in 2-ml ampoules, each containing 10 mgm. of isoxsuprine hydrochloride.

INDICATIONS: Cerebral arteriosclerosis; cerebral ischaemia; cerebral vaso-spasm.

CONTRAINDICATIONS: Recent haemorrhage.

DOSAGE: *Oral*: 20 mgm. three or four times daily. *Intramuscular*: one ampoule three or four times daily.

SIDE EFFECTS: Flushing, tachycardia and hypotension may occur but are rare, especially with oral dosage.

SHELF LIFE: Two years at room temperature.

PACKS: *Tablets* in containers of fifty and 250. *Ampoules* in box of five.

SUPPLY RESTRICTIONS: Recommended on prescription only.

FIRST ISSUED: 10 mgm. tablets, and injection, 1963. 20 mgm. tablets November 1967. (Revised monograph.)

THE CHEMIST AND DRUGGIST Guide to New Medicaments, Jan. 13, 1968

DUVADILAN NA tablets

MANUFACTURER: Crookes Laboratories, Ltd., Basingstoke, Hants.

DESCRIPTION: Yellow tablets scored on one side with a line and the letters D.N.A., each containing 10 mgm. of isoxsuprine hydrochloride and 35 mgm. of nicotinic acid.

INDICATIONS: Chills.

CONTRAINDICATIONS: Recent haemorrhage.

DOSAGE: One tablet three times a day.

SIDE EFFECTS: Flushing may occur.

SHELF LIFE: Two years at room temperature.

PACK: Bottle of sixty tablets.

SUPPLY RESTRICTIONS: Recommended on prescription only.

FIRST ISSUED: January 1967.

THE CHEMIST AND DRUGGIST Guide to New Medicaments, Jan. 13, 1968

NUVACON tablets

MANUFACTURER: The British Drug Houses, Ltd., Graham Street, City Road, London, N.1.

DESCRIPTION: Yellow coated tablets 0.280-0.285 in. in diameter, each containing 0.1 mgm. of ethinyloestradiol and 2 mgm. of megestrol acetate.

INDICATIONS: Oral contraception.

CONTRAINDICATIONS: Fibroids, mammary carcinoma.

DOSAGE: One tablet should be taken daily for twenty-one days of the menstrual cycle, beginning on fifth day after onset of menstrual bleeding.

SIDE EFFECTS: Occasionally, mild nausea during the first few courses. Intermenstrual spotting, if experienced, is usually slight and of no significance.

STORAGE: Should be kept in a dry place.

PACKS: Wallet of twenty-one tablets.

SUPPLY RESTRICTIONS: P.I., S.4B.

FIRST ISSUED: September 1967.

PLACING ON C. & D. TABLET AND CAPSULE IDENTIFICATION GUIDE: D3, 9/32, C, R, Cv/Cv, —, —.

THE CHEMIST AND DRUGGIST Guide to New Medicaments, Jan. 13, 1968

BUTAZOLIDIN ALKA tablets

MANUFACTURER: Geigy (U.K.), Ltd., Pharmaceuticals Division, Roundthorn Industrial Estate, Manchester, 23.

DESCRIPTION: White, compression coated tablets, imprinted Geigy, each containing 150 mgm. of magnesium trisilicate, and 100 mgm. of dried aluminium hydroxide gel around a central core of 100 mgm. of phenylbutazone.

INDICATIONS: Rheumatoid arthritis, osteoarthritis, ankylosing spondylitis, acute gout, acute rheumatism, lumbago, neuritis and neuralgia, prolapsed intervertebral disc, Reiter's disease, bone and muscle pain, superficial thrombophlebitis.

CONTRAINDICATIONS: Presence of oedema or hypertension where there is a danger of cardiac decompensation; renal and hepatic disease, including recent hepatitis; history of dyspepsia; peptic ulceration; blood dyscrasia; drug rash or known sensitivity to pyrazoles.

DOSAGE: Initially four to six tablets daily, reducing to a maintenance dosage which may be as low as one or two tablets daily.

SIDE EFFECTS: Gastro-intestinal irritation, drug rash and transient oedema are the more common side effects encountered. Drug rash is a contraindication to further treatment. Jaundice due to intrahepatic cholestasis or parenchymal hepatitis, haematemesis, swelling of salivary gland and reactivation of peptic ulcer have also been reported. Aplastic anaemia, thrombocytopenic purpura and agranulocytosis are very rare complications; careful clinical supervision during the initial weeks of therapy and routine blood counts for patients on long-term treatment are valuable in their early detection.

PACKS: Containers of 100 and 500.

SUPPLY RESTRICTIONS: P.I., S.4B.

FIRST ISSUED: October 1967.

PLACING ON C. & D. TABLET AND CAPSULE IDENTIFICATION GUIDE: White, 15/32, P, R, Cv/Cv, —, 97/—.

AMENDMENTS**GYNAFLEX**

DESCRIPTION: Disposable vaginal applicators, each containing 7 gms. of a gel containing in 1 gm. 0.025 gm. of noxythiolin and 0.001 gm. of lignocaine hydrochloride in a methylcellulose base.

C. & D. TABLET AND CAPSULE IDENTIFICATION GUIDE
New products

ALUPENT-SED tablets: White, 14/32, P, R, F/F, B2, 393/371.

BUTAZOLIDIN ALKA tablets: White, 15/32, P, R, Cv/Cv, —, 97/—.

COTAZYM B tablets: F10, 13/32, P, R, Cv/Cv, —, —.

DULCODOS tablets: White, 15/32, C, R, Cv/Cv, —, 371/371.

DUVADILAN N.A. tablets: C3, 11/32, P, R, F/F, B2, 395/—.

MAGMILOR tablets: White, 13/32, C, R, Cv/Cv, —, —.

MAGMILOR pessaries: B3, 41/32, P, 397, F/F, B2, —.

MYAMBUTOL 100 mgm. tablets: B3, 10/32, C, R, Cv/Cv, —, —.

MYAMBUTOL 400 mgm. tablets: F13, 16/32, C, R, Cv/Cv, —, —.

NEUTRODYNE capsules: White, 27/32, H, Ob, —, —, —.

NUVACON tablets: D3, 9/32, C, R, Cv/Cv, —, —.

PARAMOL-118 tablets: White, 16/32, P, R, F/F, B2, 394/—.

PRONDOL 15 mgm. tablets: E2, 10/32, P, R, F/F, B2, 236/396.

Additions

ATROMID-S 500 mgm. capsules: E14, 24/32, S, Ob, —, —, —.

DUVADILAN 10 mgm. tablets: White, 11/32, P, R, F/F, B2, N/—.

DUVADILAN 20 mgm. tablets: G8, 11/32, P, R, F/F, B2, N/—.

Products changed in appearance

COTAZYM capsules: D13, H, Ob, —, —, —.

STECIN capsules: F1, 24/32, H, Ob, —, —, 379.

ORGANON LABORATORIES, LTD., tablets: All products, except Diandrone and Stenediol are now coded (for list see C. & D., June 3, 1967, p. 527).

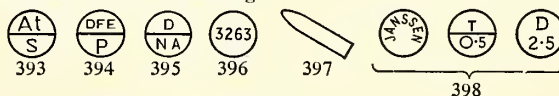
Janssen Pharmaceuticals (division of Ortho Pharmaceuticals, Ltd.) codes (mark styles 398)

D 2.5 Droleptan 2.5 mgm. tablets.

D 10 Droleptan 10 mgm. tablets.

T 0.5 Triperidol 0.5 mgm. tablets.

T 1 Triperidol 1 mgm. tablets.

Additions to table of markings

EMERGENCY AIR LIFT FOR UNIQUE DRUG

World's only maker organises a world-wide service

A ROUND-THE-CLOCK emergency service to patients in any part of the world with the life-saving drugs AHG (perine and bovine antihæmophilic globulins), has been instituted by Maws Pharmacy Supplies, Aldersgate House, Barnet, Herts. The drugs are used to save hæmophilia patients from bleed-

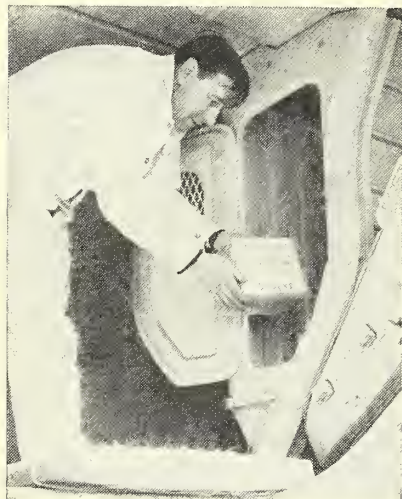
attending to documentation, picking the quickest flight, and warning the airline concerned.

Recently a consignment was landed in Holland only two hours after the telephone request was received. Another consignment was delivered in the far South of the United States within twenty-four hours of a call to Barnet.

Antihæmophilic globulin developed from research into the production of thrombin in 1936. The experience gained in the extraction of blood-coagulation factors was turned to account when a leading group of

haematologists in this country worked out a process on the laboratory scale for making animal antihæmophilic globulin. In 1954 Maws Pharmacy Supplies organised its large-scale production to meet the demands of the world. The drug is expensive to make, requiring enormous quantities of animal blood, elaborate processes and tests. Of the two types produced, one course of each may be given to a hæmophilia patient, and it now seems that in certain cases second courses may be given.

Five specialists are engaged full-time in the production of AHG, and the institution of the emergency airlift service by the company is causing overseas demand to build up.



A consignment of AHG for a patient in Boston, Massachusetts, U.S.A., being loaded on to a VC-10 aircraft.

ing to death, and Messrs Maw are their only producer in the world. To give emergency authority for the drugs to be shipped, the company's chief chemist and two other top executives are available twenty-four hours a day.

Air Express, Ltd., collaborates in keeping supplies always available at London Airport for immediate dispatch by plane on receipt of a telegram or 'phone call. Stocks are available for immediate dispatch to any part of Great Britain by air or rail. Air Express officers ensure that the drug is in transit in the shortest possible time by

RADIATION AND THE PHARMACIST

"Challenge, interest, satisfaction"

RADIOPHARMACEUTICALS were the pharmacist's province said Branch member Mr. H. LITTLE (department of nuclear medicine, Liverpool clinic) addressing a recent meeting of Liverpool Branch of the Pharmaceutical Society. Speaking on the "Pharmaceutical Aspect of Nuclear Medicine," Mr. Little said that nuclear medicine presented to the pharmacist and pharmacy in general a greater challenge, greater interest and greater satisfaction than almost any other branch of medicine. The pharmaceutical aspects could be divided into dispensing of radioactive substances; quality control; and preparative techniques. Dealing only with preparative techniques arising from the diagnostic procedure known as scanning, Mr. Little described the procedure and the method of selection of suitable radionuclides. He gave a bench demonstration of characteristics of different types of radiation, using phosphorus³², a pure negatron emitter of high energy; technetium^{99m}, a pure gamma emitter with a suitable energy for scanning; and sodium²⁴, a high-energy gamma and negatron emitter. Short-lived radioisotopes were often preferable, he said, because larger amounts could be given to the patient. Sources of short-lived

radioisotopes were (1) from the generator system—the longer lived parent fixed on a chromatography column from which the short-lived daughter could be eluted as required; and (2) neutron irradiation of stable isotopes at the University research reactor. Such short-lived isotopes must often be processed so that they would localise in the organ under survey. A properly equipped radiopharmaceuticals laboratory was required, and radiopharmaceuticals were, said the speaker, the province of the pharmacist. Giving a detailed description of some radiopharmaceutical preparations routinely prepared by him, Mr. Little gave an explanation of their use. Human serum albumin labelled with either technetium^{99m} or iodine¹³² was used for placental localisation. Radiation hazards to the foetus had to be considered. Macro-albumin aggregates labelled with either technetium^{99m} or iodine¹³¹ were used for lung scanning.

Emphasis was on the size of the particles which, if too small, would pass the lungs and lodge in the liver, while if too large might lodge in the brain and cause cerebral embolism. A preparation of sulphur and tin colloids labelled with technetium^{99m} was used for liver scanning. That required a much lower radiation dose to the patient than formerly when gold¹⁹⁸ was used. For processing and use in bone scanning there was the preparation of strontium⁸⁹ and fluorine¹⁸ by reactor radiation: because of their short half-lives, multimillicuries of those bone-retained isotopes could be administered.

LEAD IN WATER

Chief Medical Officer's warning

THE attention of local medical officers of health has been drawn to recent reports of a high lead content in samples of water taken from some houses. The Ministry of Health's chief medical officer warns that in areas supplied with plumbo-solvent waters it may be necessary either to treat the water or to warn householders to run taps before use in the mornings, to avoid the use of the hot water system for drinking purposes and to run taps thoroughly after the house has been unoccupied for a time. Sometimes pipe replacement may be the only acceptable solution.

OUT-OF-HOURS DELIVERIES

New scheme in Greater London

A NEW grocery trade out-of-hours delivery scheme that starts in the Greater London area and marginally beyond on January 8, 1968, may, if successful, be extended to include "chemists' goods." The aim is to overcome road congestion and restricted access to retail outlets, to improve the efficiency of deliveries to shops. When the scheme gets under way about thirty manufacturing companies will be employing up to 100 supply vehicles to make out-of-hours deliveries to nearly 120 retail outlets central warehouses owned by twelve large retail grocery chains. London has been divided into the four sectors, and manufacturers will deliver to the outlets in each sector between 6 p.m. and 10 p.m. on one night a week from Monday to Thursday. The Greater London Council is providing a tactical communications centre to receive and pass on information between the par-

ticipating companies for such eventualities as vehicle breakdown, driver absence or failure of a store to open, etc. So soon as the scheme is under way, attempts will be made to start similar schemes for other trades in the London area. Possible candidates for early action are laundry and dry cleaning, chemists' goods and the hotel and catering field. Plans are understood to be well advanced for an out-of-hours delivery scheme to warehouses in the Manchester/Liverpool area.

Firms Taking Part

Amongst manufacturers and distributors taking part are:—Cresco Paper Products, Procter & Gamble, Ltd., The Nestlé Co., Ltd., Bowater Scott Corporation, Ltd., Energen Foods Company, Ltd., Jeyes Group, Ltd., Reckitt & Colman, Beecham Products (UK), Brown & Polson, Ltd., Lever Bros. & Associates, Ltd., Colgate-Palmolive, Ltd.

TRADE REPORT

The prices given are those obtained by importers or manufacturers for bulk quantities or original packages. Various charges have to be added whereby values are augmented before wholesale dealers receive the goods into stock.

LONDON, JANUARY 10: The wintry weather and incidence of influenza have caused an improved demand for a number of seasonal CRUDE DRUGS; otherwise business generally remained slow in the markets. MENTHOL, particularly Brazilian, was firm despite devaluation by Brazil during the week. Costa Rican IPECACUANHA was dearer on the spot with no offers from source. SENEGA for prompt delivery and CHERRY BARK were also marked up, bringing the values nearer to replacement costs. The first offers of new-crop BUCHU were received at 13s. 9d. per lb., c.i.f., but there were no reports of business being placed. CAMPHOR POWDER was not available on the spot or forward. Some GINGERS were slightly easier. Elsewhere (in SPICES) NUTMEGS and TURMERIC for shipment were also lower. Canadian LYCOPodium was quoted at 21s. lb., spot and c.i.f. Because of devaluation, LIQUORICE block juice is sharply up at 250s. cwt. (against 210s.). Some SENNA PODS and LEAVES are becoming scarce, particularly the better grades. HONEY prices have been adjusted.

In ESSENTIAL OILS, Ceylon CITRONELLA was dearer by fourpence per lb. for shipment but the Chinese variety was down one penny. *Arvensis* PEPPERMINT (both Chinese and Brazilian), was down threepence per lb. Also lower for shipment were Chinese ANISE and Brazilian BOIS DE ROSE. Higher were Madagascar CLOVE LEAF (up ninepence per lb.) and LEMONGRASS (up one shilling per kilo).

NICOTINIC ACID was dearer by 2s. per kilo and NICOTINAMIDE by sixpence. VITAMIN A ACETATE and PALMITATE were also dearer.

Pharmaceutical Chemicals

BRUCINE.—(Per oz.) SULPHATE, 100-oz., 14s. 6d.; 1,000 oz., 12s.; 10,000 oz., 9s.; 20,000 oz., 8s. ALKALOID for same quantities, 17s., 14s. 9d., 11s. 9d. and 10s. 9d.

CITRATES.—(Per kilo):—

	50 kilos	250 kilos	1,000 kilos
	s. d.	s. d.	s. d.
SODIUM ...	5 0½	4 11½	4 9½
POTASSIUM ...	5 3½	5 2½	5 0½
IRON AND AMMONIUM GRAN. SCALES	9 11	9 7	9 4
	12 11	12 7	12 4

EMETINE.—One-kilo lots HYDROCHLORIDE, 11,431s. per kilo.

EPHEDRINE.—HYDROCHLORIDE, 4s. 1½d. per oz. (1,000-oz. lots).

FORMALDEHYDE.—B.P. solutions, 5-drum lots, 747s. 6d. per ton delivered.

HEXAMINE.—B.P.C. 1959, 50-kilo lots are 6s. per kilo.

HISTAMINE.—ACID PHOSPHATE £200 kilo.

HYDROGEN PEROXIDE.—For 27.5 per cent. by weight, £115 per ton; 35 per cent., £138.

HYOSCINE HYDROBROMIDE.—Per kilo, 3,418s. 10d.; METHYL BROMIDE, 3,589s. 9d.

HYOSCYAMINE SULPHATE.—1-kilo lots, 1,181s.

NICOTINAMIDE.—(Per kilo). 1-kilo, 32s.; 10-100 kilos, 29s.

NICOTINIC ACID.—1-kilo, 28s. 6d.; 10-100 kilos, 25s. 6d. per kilo.

NIKETHAMIDE.—50-kilo lots are 52s. 9d. per kilo.

PHENOL.—Ice crystals in bulk, 1s. 4d. per lb. LIQUID, B.P., 1s. 9d. per lb. in 56-lb. returnable tins.

PHENOLPHTHALEIN.—1-cwt., 9s. per lb.

SANTONIN.—5-kilo lots, 320s. per kilo.

TALC.—B.P.C. in 1-ton lots is quoted at 1s. 2d. per lb.

VITAMIN A.—ACETATE and PALMITATE up to 10,000 m.i.u. 2½d. per m.i.u.; 10-50,000 m.i.u. 2½d.

Crude Drugs

ACONITE.—Spanish *napellus*. 3s. 6d. lb.; (3s. 3d., c.i.f.).

AGAR.—Kobe No. 1, 20s. 6d. lb., c.i.f.; European, 22s. 6d. duty paid.

BELLADONNA.—LEAVES, 4s. 3d. lb., c.i.f. (4s. 3d.-4s. 6d. spot); HERB, 2s. 11d., c.i.f. (2s. 9d. spot); ROOT, 1s. 11d., c.i.f. (2s. spot).

BENZONIN.—Sumatra block B.P.C., spot £27 per cwt.

BUCHU.—LEAVES, new-crop, 13s. 9d., lb., c.i.f.

CALUMBA.—Mozambique root, 125s. cwt., c.i.f. (120s. spot).

CAMPHOR.—B.P. powder, spot unobtainable; shipment, nominal.

CAPSICUMS.—Ethiopian off-stalk, 280s. cwt. (255s., c.i.f.). Kenya, 185s., c.i.f.

CARDAMOMS.—(per lb.). Alleppy greens, 18s. (16s. 6d., c.i.f.). Prime seed, 32s. (31s., c.i.f.).

CASCARA.—285s. cwt., c.i.f. (275s.-280s. spot).

CASSIA.—*Lignea*, spot, 360s. per cwt., duty paid.

CHERRY BARK.—Thin natural, 2s. 5d. lb., c.i.f. and spot.

ERGOT.—Portuguese — Spanish, 8s. lb. (7s. 6d., c.i.f.).

GENTIAN.—Spot, 230s. cwt.; 220s. c.i.f.

GINGER.—(per cwt.), Nigerian split, 160s. (142s. 6d., c.i.f.); peeled, 175s. (160s., c.i.f.); Jamaican No. 3, 330s.; Cochin, 220s. (205s., c.i.f.); African, 185s., spot.

GUM ACACIA.—Kordofan cleaned sorts, 247s. 6d. ex wharf.

HONEY.—(per cwt., ex store). Australian light amber, 130s. to 132s. 6d.; and medium amber, 115s. to 120s. Argentine, 123s. to 125s.; Canadian, 190s. to 192s. 6d.; Mexican, 130s. to 132s. 6d.; Chinese, 107s. 6d. to 110s.

IPECACUANHA.—(Per lb.). Matto Grosso, 49s., c.i.f.; Costa Rican (spot), 60s. to 62s. 6d., as to test; Colombian, 47s. 6d., c.i.f.

LIQUORICE.—ROOT, Russian, 67s. 6d. per cwt.; Anatolian, 57s. 6d.; Anatolian decorticated, 170s. BLOCK JUICE: Anatolian, 250s. per cwt.

LOBELIA.—(lb.). Dutch, new crop, 4s. 5d., c.i.f. (4s. 3d.-4s. 6d. spot), American, 12s. 6d., c.i.f. (spot 11s. 6d.-12s.).

LYCOPodium.—Canadian, 21s. lb. spot and c.i.f.

MACE.—Grenada No. 1, new crop, 9s. 6d., c.i.f.

MENTHOL.—(Per lb.). Chinese, 36s. 3d., c.i.f.; spot, 36s. 6d., in bond. Brazilian for shipment, 35s., c.i.f.; spot, 35s., in bond.

MERCURY.—Spot, £220 per flask of 76 lb., ex warehouse.

NUTMEGS.—(Per lb.). West Indian, defectives, 3s. 6d. (2s. 6d., c.i.f.).

RHUBARB.—Various grades offered at from 10s. to 35s. per lb. spot.

SAFFRON.—Mancha superior, 965s. per lb.; Rio, 930s., landed terms.

SARSAPARILLA.—Jamaican, 3s. 1d. lb., c.i.f. (3s. 6d. spot).

SEEDS.—(Per cwt.). ANISE.—China star, 270s. duty paid. CELERY.—Indian, 170s. spot and c.i.f. CORIANDER.—Moroccan, 137s. 6d., duty paid (113s., c.i.f.); Rumanian whole seeds, 112s. c.i.f. CUMIN.—Iranian and Syrian, 185s., duty paid. DILL.—Indian, 130s., (110s. c.i.f.) FENNEL.—Chinese, 135s., duty paid. FENUGREEK.—Moroccan, 97s. 6d., duty paid. (alloat, 76s., c.i.f.). MUSTARD English, 75s. to 100s.

SENEGA.—Canadian, 31s. 6d. lb., c.i.f. (31s.-31s. 6d. spot). Japanese new crop 24s. 6d., c.i.f.; spot (old crop), 24s. 6d. in bond.

SENNA.—(Per lb.). Tinnevely LEAVES spot; Prime No. 1, 2s. 6d. nominal; No. 3, f.a.q. 1s. 4½d.; shipment, No. 3, 1s. 4d., c.i.f. PODS: Tinnevely hand-picked, 2s. 9d.-3s.; manufacturing, 1s. 10d. Alexandra hand-picked spot, 5s. to 7s.; manufacturing forward, 2s. 3d. c.i.f.; spot, 2s. 6d.

SQUILL.—WHITE, 150s. cwt., spot and c.i.f. (140s.-150s. spot).

STROPHANTHUS.—*Kombe*, spot, 40s. lb.

STYRAX.—Spot, 20s. lb. (20s. 6d., c.i.f.).

TONQUIN BEANS.—Para, 9s. 3d. lb., c.i.f. (10s. 6d. spot).

TRAGACANTH.—No. 1, £280 cwt.; No. 2, £250 spot.

TURMERIC.—Madras finger, 185s. cwt. spot; Feb.-March shipment 170s., c.i.f.

VALERIAN ROOT.—Indian, 225s. cwt. (220s., c.i.f.); Continental, 470s., c.i.f. (475s. spot).

VANILLIN.—(Per lb.), 5-cwt. lots, 21s. 6d., 2-cwt., 21s. 9d.; 56-lb., 22s.; small quantities, 12s. 6d.

Essential and Expressed Oils

ALMOND.—Spanish, 5s. 3d. lb.

AMBER.—Rectified, spot, 1s. 6d. per lb.

ANISE.—Chinese, 15s. lb. (13s. 6d., c.i.f.).

BAY.—Spot, 44s. to 45s. per lb.

BERGAMOT.—Spot, 111s. 6d. lb.

BIRCH TAR.—Rectified, 145s. lb. on the spot.

BOIS DE ROSE.—Brazilian, 21s. lb. (19s. 6d., c.i.f.).

BUCHU.—Spot, from 650s. per lb.

CADE.—Spanish 2s. 3d. lb., drum lots.

CITRONELLA.—Ceylon, 5s. per lb.; (5s. 2d. c.i.f.); Formosan, 5s. 3d. in bond (5s., c.i.f.); Chinese, 4s. 7½d. in bond; (4s. 5d., c.i.f.).

CLOVE.—(lb.) Madagascar leaf for shipment, 11s. 2d., c.i.f. spot, 11s. in bond. Rectified, 13s. 6d. Distilled bud oil English, B.P., 34s.

EUCALYPTUS.—Chinese, 80-85 per cent., 10s. per kilo in bond; 9s. 9d., c.i.f.

FENNEL.—Spanish sweet, 16s. lb.

LEMON.—Sicilian, new crop quoted at 48s. to 50s. landed.

LEMONGRASS.—34s. kilo; (31s. 6d., c.i.f.), nominal.

PEPPERMINT.—(Per lb.), *Arvensis*: Chinese shipment, 11s. 3d., c.i.f.; spot, 11s. 6d.; Brazilian, 10s. 9d., c.i.f. and spot. American *Piperata*, 40s. to 47s. 6d.

PETITGRAIN.—Paraguay for shipment, 16s. 6d., c.i.f., spot, 17s. per lb.

PIMENTO.—BERRY, imported, 95s.; English distilled, 390s.; LEAF, 21s. per lb.

ROSEMARY.—Spanish, 10s. lb. spot.

SAGE.—Spanish, 18s. to 19s. per lb.

UNITED STATES REPORT

NEW YORK, JANUARY 9: BOTANICALS were generally unchanged in price during the week. BERGAMOT OIL moved lower to \$15.00-\$18.00 a lb. from \$17.00-\$18.00.

TRADE MARKS

APPLICATIONS ADVERTISED BEFORE REGISTRATION

"Trade Marks Journal,"

December 20, 1967, No. 4660

For face powders and cuticle softeners, all being non-medicated toilet preparations; hair restorers; cosmetics in cream or liquid form, talcum powder for toilet use; perfumes, lipsticks, rouge, eye shadow; and perfumed oils for the bath and for toilet purposes; all being goods for use upon or in relation to the skin (3)

ROMNAY CUTITRIM, ROMNAY KUTITRIM., B895,755-56, ROMNAY KUTIBUTI, B895,758, by Romney Cosmetics, Ltd., Sandwich, Kent.

For perfumes, non-medicated toilet preparations, cosmetic preparations, dentifrices, depilatory preparations, toilet articles, sachets for use in waving the hair, shampoos, and essential oils (3)

SUN SPRING, 906,264, by Beecham Toiletory Division, Brentford, Middlesex.

For soaps, hair lotions and dentifrices; etc. (3) MAGITEX, 906,869, by Sterwin, A.G., Zug, Switzerland.

For shampoos; non-medicated skin preparations; cosmetics, etc. (3)

Device with letters DR, B908,323, by Dutton & Renische, Ltd., London, S.W.7.

For non-medicated bath salts (3)

SUNSOFT, 909,715, by Beecham Toiletory Products, Brentford, Middlesex.

For non-medicated toilet preparations, cosmetic preparations, perfumes, soaps, essential oils, dentifrices (3)

BINATROL, 910,642, by CIBA Ltd., Basle, Switzerland.

For perfumes, non-medicated toilet preparations, cosmetic preparations, dentifrices, depilatory preparations, toilet articles, sachets for use in waving the hair, shampoos, soaps and essential oils (3)

WONDRA, B911,580, by Proctor & Gamble, Ltd., Gosforth, Newcastle-on-Tyne.

For perfumes, non-medicated toilet preparations, cosmetic preparations, soaps, detergents (not for use in industrial or manufacturing processes), and shampoos, all for sale in the United Kingdom otherwise than for export but not excluding goods for exports to the Irish Republic (3)

BLISSOM, 911,972, TIP TOE, 911,974, by Reckitt & Sons, Ltd., Hull, Yorks.

For preparations for cleaning dairy equipment (3) and for preparations for sterilising dairy equipment (5)

RINSAN, 882,906-07, by Hadleigh-Crowther, Ltd., Reading, Berks.

For pharmaceutical, sanitary and disinfecting preparations and substances; deodorants; preparations for repelling and killing insects; and preparations for freshening the air and destroying air-borne germs (5)

ANORA, B898,939, by Upjohn, Ltd., Crawley, Sussex.

For veterinary preparations, but not including obstetric lubricants for veterinary use (5)

BONAIID, B901,434, by Norwich Pharmacal Co., Norwich, New York, U.S.A.

For pharmaceutical preparations containing seltzer (5)

EFFERSELTZ, 905,393, by Sterwin, A.G., Zug, Switzerland.

For pharmaceutical, medical and veterinary preparations and substances (5)

ERADIVAX, 906,309, by Wellcome Foundation, Ltd., London, N.W.1.

For pharmaceutical, and veterinary preparations and substances, all for use in the prophylaxis of the chest, lungs or respiratory passages (5)

PNEUMOVAC, 906,569, by Twyford Laboratories, Ltd., London, N.W.10.

For pharmaceutical preparations (5)

TROBICIN, 907,626, by Upjohn, Ltd., Crawley, Sussex.

For vitamin preparations (5)

CLEVIT, 908,824, by Beecham Food & Drink Division, Brentford, Middlesex.

For pharmaceutical preparations and substances, all containing aluminium hydroxide gel (5)

WINGEL, 909,249, by Winthrop Products, Inc., New York, U.S.A.

For pharmaceutical preparations for use in the treatment of cardio-vascular diseases (5)

CORADEL, 910,076, by Imperial Chemical Industries, Ltd., London, S.W.1.

For pharmaceutical and veterinary preparations and substances (5)

CEOPIN, 910,318, by Chas. Pfizer & Co., Ltd., New York, U.S.A.

For medicated beverages; foods and beverages for infants and invalids and for dietetic purposes (5)

NITELITE, B190,526, by Beecham Foods, Brentford, Middlesex.

For wool fat and solidified wool alcohol, all prepared for pharmaceutical purposes (5)

Device with words GOLDEN DAWN, 910,855, by Westbrook Lanolin Co., Bradford, Yorks.

For medical and veterinary preparations (5)

CYANAFOSCAL, 911,569, by American Cyanamid Co., Wayne, New Jersey, U.S.A.

For deodorants and medicated preparations for the treatment of the skin and the scalp (5)

SHULTON, B911,799, by Shulton, Inc., Clifton, New Jersey, U.S.A.

For insecticides, fungicides and weedkilling preparations (5)

SAPHICIDE, 912,745, by Plant Protection, Ltd., London, S.W.1.

For anti-epileptic preparations (5)

ETHYMAL, 912,977, by Berk Pharmaceuticals, Ltd., Godalming, Surrey.

For laboratory apparatus and instruments and parts and fittings, all having a clamping action (9)

Device with word TRICLAMP, B883,208, by Scantact, Ltd., London, E.C.2.

For cameras; and magazines and cartridges for use therewith, all for photographic film (9)

INSTA-CAMERA, 905,711, by Camera Corporation of America, Hicksville, New York, U.S.A.

For ileostomy bags (10)

Ileosac, B908,763, by S. W. Price & Son, Ltd., Denham, nr. Uxbridge, Middlesex.

For catheterisation sets (10)

CATHPAK, 910,706, by William Warne & Co., Ltd., Barking, Essex.

PATENTS

From the "Official Journal (Patents),"
December 13, 1967

13-alkyl 17-halogenoalkynyl-steroid 3-ketones and their derivatives. H. Smith, 1,100,441.

Gonadienones. H. Smith 1,100,442.

5-hydroxytetracycline derivative and intermediates thereof. Chas. Pfizer & Co., Inc. 1,100,495.

Process for the manufacture of Δ^4 -pregnene-11 β - and 11 α , 17 α 21-triol-3,20-diones. Schering, A.G. 1,100,505.

Device for measuring a part of the human body for fitting a surgical or therapeutic garment. Jobst Institute, Inc. 1,100,538.

Bronchial dilators. C.E.G. Dundgren and I.J.A. Lichtnekt. 1,100,612.

Anti-bilharziasis compounds and their production. Farbenfabriken Bayer, A.G. 1,100,698.

Antibiotic mebrospor. Upjohn Co. 1,100,731.

Pesticides. Pittsburgh Plate Glass Co. 1,100,769.

6-Amino-penicillanic acid and a process for the preparation thereof. Banyu Pharmaceutical Co., Ltd. 1,100,807.

Quinoline derivatives and preparation thereof. J. Debat. 1,100,870.

Oxytetracycline esters and preparation thereof. Chas. Pfizer & Co., Inc. 1,100,884-85.

Estratriene. Soc. Farmaceutici Italia. 1,100,900.

British patent specifications relating to the above will be obtainable (price 4s. 6d. each) from the Patents Office, 25 Southampton Buildings, Chancery Lane, London, W.C.2, from January 24, 1968.

From the "Official Journal (Patents),"
December 20, 1967

Precipitating blood from aqueous dispersions. American Cyanamid Co. 1,100,989.

Apparatus and method for preparing a biological sample. International Business Machines Corporation. 1,101,063.

Vacuum flasks. British Vacuum Flask Co., Ltd. 1,101,073.

Compositions for the treatment of psoriasis. J. Glasser. 1,101,104.

Steroidal isoxazoles. Ormonoterapia Richter, S.p.A. 1,101,111.

Steroidal pyrazoles. Ormonoterapia Richter, S.p.A. 1,101,112.

2-Hydroxy-3-oxo steroids. Ormonoterapia Richter, S.p.A. 1,101,113.

Steroidal (2,3-d)-isoxazoles. Ormonoterapia Richter, S.p.A. 1,101,114.

2-Hydroxyethylene steroids. Ormonoterapia Richter, S.p.A. 1,101,115.

Steroidal 2 α -carboxylic acids and esters. Ormonoterapia Richter, S.p.A. 1,101,116.

Steroidal 2 α -carbonyl-hydrazones. Ormonoterapia Richter, S.p.A. 1,101,117.

2 α -Cyano steroids. Ormonoterapia Richter, S.p.A. 1,101,118.

2 α -Aminocarbonyl steroids. Ormonoterapia Richter, S.p.A. 1,101,119.

2-Aminocarbonyl 3-amino- Δ^2 -steroids. Ormonoterapia Richter, S.p.A. 1,101,120.

6-aza-steroids. Regents of U.S.A. Michigan University. 1,101,123.

Steroids and the manufacture thereof. Regents of U.S.A. Michigan University. 1,101,124-25.

9 β ,10 α -steroids and a process for the manufacture thereof. P. Hoffmann-La Roche & Co., A.G. 1,101,129.

1,2-epoxy-9 β ,10 α -steroids and a process for the manufacture thereof. F. Hoffmann-La Roche & Co., A.G. 1,101,130.

Nitrofuryl quinazolines. Norwich Pharmacal Co. 1,101,179-80.

Process for preparing nucleotide derivatives. Sankyo Co., Ltd. 1,101,233.

Derivatives of 5-nitrofurran, processes for their preparation and compositions containing said compounds. Abie, Ltd., R. G. Haber and E. Schoenberger. 1,101,333.

Antibiotic shincomycin and production thereof. Kyowa Hakko Kogyo, K.K. 1,101,361.

Pharmaceutical compositions and a process for the manufacture thereof. F. Hoffmann-La Roche & Co., A.G. 1,101,366.

Derivatives of vitamin B and a process for preparing same. Tanabe Seiyaku Co., Ltd. 1,101,369.

2-Methoxy-3,6-dichlorobenzyl derivatives and their use as pesticidal agents. Velsicol Chemical Corporation, 1,101,396.

Adhesives for surgical dressings, and dressings with such adhesives. T. J. Smith & Nephew, Ltd. 1,101,417.

7-Aminocephalosporanic acid derivatives. Glaxo Laboratories, Ltd. 1,101,422, 23, 24.

Method for cultivating micro-organisms having exoenzyme-producing ability. Kikkoman Shoyu Co., Ltd. 1,101,440.

Synergistic pharmaceutical compositions comprising local anaesthetics, myotic and neurotropic drugs. Laboratoires Chibret. 1,101,458.

Cardio-active composition. Knoll, A.G. 1,101,479.

Mitotense derivatives. Kyowa Hakko Kogyo Co., Ltd. 1,101,300.

Cephalosporin betaines and salts. Glaxo Laboratories, Ltd. 1,101,561, 62.

Extracting pertussis antigen. Parke, Davis & Co. 1,101,578.

Extraction of poly-peptide-containing anorexigenic substance and polypeptide-containing fat-mobilising substance from animal urine. Canadian Patents & Development, Ltd. 1,101,711.

Amides. Laboratoire Roger Bellow. 1,101,711.

Salicylamide derivatives. Sterwin, A.G. 1,101,747.

Pharmacologically valuable N-substituted piperazines and compositions containing them. Wellcome Foundation, Ltd. 1,101,749.

Poly lactide filaments and surgical sutures. Ethicon Inc. 1,101,766.

1 α :7 α -Dimethyl steroids and a process for their manufacture. Schering, A.G. 1,101,791.

Substituted oxindoles and the manufacture thereof. Upjohn Co. 1,101,794.

Insecticidal compositions. Upjohn Co. 1,101,803.

Skin disinfectant. Deutsche Solvay-Werke, G.m.b.H. 1,101,830.

British patent specifications relating to the above will be obtainable (price 4s. 6d. each) from the Patents Office, 25 Southampton Buildings, Chancery Lane, London, W.C.2, from January 31, 1968.

NOTES ON NEW MEDICAMENTS

MAGMILOR.—*Chemistry:* N-(5-nitro-2-furfurylidene - 3 - amino - 5 - methylmercapto-methyl - 2 - oxazolidine (approved name nifuratel). A nitrofuran derivative, the drug has an unusual range of pharmacological activity being effective against trichomonas, candida and the bacteria associated with vulvovaginitis. Nifuratel is one of a number of furan derivatives which possess the ability to inhibit the growth of organisms and, although the mechanism of action is not clear, it is presumed to be mediated by an interference with enzyme activity. The development of resistance to nifuratel is not a problem, and cross resistance with the sulphonamides or antibiotics does not occur. Although the drug is not very soluble, oral administration results in a blood-level of the drug that has a systemic trichomonacidal action. The compound is largely metabolised in the body and excreted in the urine, and although the metabolite has no trichomonacidal action, it retains some of the antibacterial properties of the parent drug. It is of interest to note that when the therapeutically similar product metronidazole is used in patients accustomed to alcohol, the side effects of the drug reduced the desire for alcohol, and metronidazole has been suggested in the treatment of alcoholism. Intolerance reactions of this type are uncommon with nifuratel.

COMING EVENTS

Items for inclusion under this heading should be sent in time to reach the Editor not later than first post on Wednesday of week of insertion.

Monday, January 15

- CHEMICAL SOCIETY, Leicester University, at 4.30 p.m. Dr. A. C. T. North (Oxford University) on "Lysozyme."
- COLCHESTER BRANCH, PHARMACEUTICAL SOCIETY, Fleece hotel, Colchester, at 8 p.m. Mr. R. Blyth (Editor, *Pharmaceutical Journal*) on "The Cuckoo in the Nest."
- ENFIELD CHEMISTS' ASSOCIATION, Wheatsheaf hotel, Baker Street, Enfield, at 7.45 p.m. Mr. C. C. Stevens (a member of Council) on "The Sainsbury Report and what follows."
- GUILDFORD BRANCH, PHARMACEUTICAL SOCIETY, Prince of Wales hotel, Woodbridge Road, Guildford, at 7.45 p.m. Talk and demonstration by Yardley of London, Ltd. (toilet assistants invited).
- STOCKPORT BRANCH, PHARMACEUTICAL SOCIETY, Belgrade hotel, Stockport, at 8 p.m. Ladies supper evening with rainbow whist.

Tuesday, January 16

- BIRMINGHAM BRANCH, PHARMACEUTICAL SOCIETY, Stafford suite, Garden House hotel, Hagley Road, Edgbaston, Birmingham, 16, at 7.45 p.m. Mr. J. K. Crellin (secretary, British Society for the History of Pharmacy) on "Some By-ways of Pharmaceutical History."
- BURNLEY BRANCH, PHARMACEUTICAL SOCIETY, Swan and Royal hotel, Clitheroe, at 7.30 p.m. Annual dinner and dance.
- CHEMICAL SOCIETY, ROYAL INSTITUTE OF CHEMISTRY and SOCIETY OF CHEMICAL INDUSTRY, University College, Bangor, Caernarvonshire, at 5.45 p.m. Mr. W. J. Eilbeck (University College, Bangor) on "LSD 25."
- COVENTRY AND WARWICKSHIRE BRANCH, NATIONAL PHARMACEUTICAL UNION, Fletch hotel, Fletchamstead Highway, Coventry, at 7.45 p.m. Mr. G. F. Paisley on "Co-operative Buying — the Financial and Social Benefits."
- EAST METROPOLITAN BRANCH, PHARMACEUTICAL SOCIETY and WEST HAM ASSOCIATION OF PHARMACISTS, Medical education centre, Whipps Cross Hospital, London, E.11, at 8 p.m. Mr. A. D. Thornton-Jones on "Dispensing and Prescribing in the Metric System."
- FIFE BRANCH, PHARMACEUTICAL SOCIETY OF GREAT BRITAIN, Ollerton hotel, Kirkcaldy,

at 7.30 p.m. Detective Inspector I. Walker on "Work of the C.I.D."

HULL BRANCH, PHARMACEUTICAL SOCIETY, Queens hotel, Hull, at 8 p.m. Dr. K. Keczes on "Pharmacy and Dermatology with Regard to Skin Allergies."

LIVERPOOL BRANCH, PHARMACEUTICAL SOCIETY, Exchange hotel, Liverpool, at 8.15 p.m. "Anti-depressant Drugs" (recorded lecture).

NORTH METROPOLITAN BRANCH, PHARMACEUTICAL SOCIETY and City Division, British Medical Association, Arsenal stadium (Avenell Road entrance) at 8 p.m. Film "Depression" and cosmetic demonstration arranged by William R. Warner & Co., Ltd. (wives invited).

NOTTINGHAM BRANCH, PHARMACEUTICAL SOCIETY, 64 St. James Street, Nottingham, at 7.30 p.m. Discussion of problems submitted by members on (a) White Paper on forthcoming medicines legislation; (b) Health Services and Public Health Bill.

SOCIETY OF INSTRUMENT TECHNOLOGY, Berkeley hotel, High Street, Cheltenham, Glos, at 7.30 p.m. Mr. S. H. Crooks on "Scientific and Medical Principles in Treating Cancer with Cobalt Radiation."

TEES-SIDE BRANCH, PHARMACEUTICAL SOCIETY, Corporation hotel, Corporation Road, Middlesbrough, at 7.45 p.m. Dr. G. R. Boyes on "Drug Interaction."

THANET BRANCH, PHARMACEUTICAL SOCIETY, Holland House hotel, Edgar Road, Cliftonville, at 7.30 p.m. Hair colouring demonstration arranged by Eilda, Ltd.

WEST MIDDLESEX BRANCH, PHARMACEUTICAL SOCIETY, Park hotel, Greenford Avenue, Hanwell, at 8 p.m. Mr. K. E. Long (pharmacy planning department, National Pharmaceutical Union) on "How Others See Us."

Wednesday, January 17

- BIRKENHEAD BRANCH, PHARMACEUTICAL SOCIETY, Victoria hotel, New Brighton, at 8 p.m. Dance.
- DONCASTER BRANCH, PHARMACEUTICAL SOCIETY, Doncaster Royal Infirmary, at 7.30 p.m. Professor G. D. H. Leach on "Cardio-vascular Drugs." (Lecture course.)
- DUNDEE AND EASTERN SCOTTISH BRANCH, PHARMACEUTICAL SOCIETY, Inverarie hotel, Dundee, at 8 p.m. Annual dinner and dance.
- HARROGATE BRANCH, PHARMACEUTICAL SOCIETY, Bay Horse Inn, Burnt Yates, at 8 p.m. Annual dinner and dance. (Coach leaves West Park end of Victoria Avenue at 7.30 p.m.) [Corrected note.]
- HUDDERSFIELD BRANCH, PHARMACEUTICAL SOCIETY, Whiteley's café, Westgate, Huddersfield at 7 p.m. Annual dinner and dance.
- LEEDS BRANCH, PHARMACEUTICAL SOCIETY, Castle Grove, Headingley, at 8.30 p.m. Buffet dance.
- MANCHESTER PHARMACEUTICAL ASSOCIATION, Piccadilly hotel, Manchester, at 7 p.m. Centenary ball.
- ROMFORD BRANCH, PHARMACEUTICAL SOCIETY, Masonic hall, Hutton Mount, Brentwood, at 6.45 p.m. Annual dinner and dance.
- SOUTHAMPTON BRANCH, PHARMACEUTICAL SOCIETY, Polygon hotel, Southampton, at 7.30 p.m. Annual dinner and dance.

Thursday, January 18

- BEDFORDSHIRE BRANCH, PHARMACEUTICAL SOCIETY, Cross Keys hotel, Pulloxhill, at 8 p.m. Mr. R. H. Budworth on "Gilbert and Sullivan — the Men and their Music."
- BLACKPOOL BRANCH, PHARMACEUTICAL SOCIETY, Imperial hotel, Blackpool, at 7.45 p.m. Business meeting. Discussion of current problems.
- BOURNEMOUTH BRANCH, PHARMACEUTICAL SOCIETY, Postgraduate medical centre, Boscombe, at 7.30 p.m. Mr. D. Sparshott (a member of Council) on "The Way Ahead."
- BRADFORD BRANCH, PHARMACEUTICAL SOCIETY, Midland hotel, Bradford, at 7.45 p.m. Speaker: Mr. E. Denerly (an inspector of the Society).
- CHEMICAL SOCIETY, The University Aberystwyth, Cardiganshire, at 5 p.m. Dr. M. D. Cossey on "The Development of New Drugs."
- DEWSBURY BRANCH, PHARMACEUTICAL SOCIETY,

Black Bull hotel, Birstall, at 8.15 p.m. Inspector R. French (area crime prevention officer, West Riding Police) on "Security of Shops, Offices and Warehouses."

LANCASTER, MORECAMBE and WESTMORLAND BRANCH, PHARMACEUTICAL SOCIETY, New Unitarian church hall, Scotforth, Lancaster, at 8 p.m. Talk and demonstration arranged by Max Factor, Hollywood and London (Sales), Ltd.

LEEDS BRANCH, NATIONAL PHARMACEUTICAL UNION, Griffin hotel, Boar Lane, Leeds, at 8 p.m. Mr. K. E. Long (N.P.U. pharmacy planning department) on "Pharmacy Planning."

MANCHESTER and SALFORD BRANCH, PHARMACEUTICAL SOCIETY, Boyd House, Victoria Park, Manchester, at 7.30 p.m. Mr. C. C. Stevens (a member of Council) on "Proposed New Legislation."

NORTH METROPOLITAN BRANCH, NATIONAL PHARMACEUTICAL UNION. Visit to Mallinson House, 321 Chase Road, London, N.14, at 3 p.m.

PHARMACEUTICAL SOCIETY OF GREAT BRITAIN, 17 Bloomsbury Square, London, W.C.1, at 7 p.m. Mr. L. Wilson (director, Association of Special Libraries and Information Bureaux) on "Scientific and Technical Information — Millstone or Keystone?"

PORTSMOUTH BRANCH, PHARMACEUTICAL SOCIETY, Portsmouth medical centre, at 7.45 p.m. Mr. G. Holt on "The Case for Reincarnation" (wives invited).

SCOTTISH DEPARTMENT, PHARMACEUTICAL SOCIETY OF GREAT BRITAIN, 36 York Place, Edinburgh, at 7.45 p.m. Mr. C. G. Drummond (chairman, Scottish History of Pharmacy Committee) on "Pharmacy and Medicine in Victorian Edinburgh."

SLOUGH BRANCH, PHARMACEUTICAL SOCIETY, Beech Tree hotel, Beaconsfield, at 8 p.m. Mr. D. H. Maddock (a member of Council) on "Health Centres."

TORQUAY BRANCH, PHARMACEUTICAL SOCIETY, Torbay Hospital, Torquay, at 8 p.m. Dr. P. J. Nicholls on "Drug Abuse."

WEMBLEY BRANCH, PHARMACEUTICAL SOCIETY, Kingsbury veterans club, Roe Green Park, Kingsbury Road, London, N.W.9, at 8 p.m. Mr. R. Gookin (chief mental welfare officer, London Borough of Brent) on "My Job — as the Chief Mental Welfare Officer."

Friday, January 19

- CARDIFF BRANCH, PHARMACEUTICAL SOCIETY, Cardiff athletic club, Cardiff Arms Park, at 7.30 p.m. Skittles.
- MERSEYSIDE BRANCH, NATIONAL ASSOCIATION OF WOMEN PHARMACISTS, Royal Institution, Colquitt Street, Liverpool, at 7.30 p.m. Members' night.
- SOCIETY OF CHEMICAL INDUSTRY, 14 Belgrave Square, London, S.W.1, at 6.30 p.m. Dr. J. M. Sprague (Merck, Sharp & Dohme Research Laboratories, U.S.A.) on "Recent Advances in Diuretics."

Sunday, January 21

- PHARMACEUTICAL SOCIETY OF GREAT BRITAIN, Great hall, University of Wales, Cathays Park, Cardiff, at 10.30 a.m. Regional conference. Mr. E. A. Brocklehurst (chairman, Publications Committee) on "The Society's Publishing Activities" and Mr. J. B. Grosset (chairman, Organisation Committee) on "The Democratic Process."

Courses and Conferences

LIVERPOOL REGIONAL COLLEGE OF TECHNOLOGY, Bytom Street, Liverpool, 3. Postgraduate course on pharmacology of modern drugs. Five lectures commencing January 23. Fee £2. Details from school of pharmacy at College.

Advance Information

NORTH LONDON PHARMACEUTICAL ASSOCIATION, Quaglinos, Bury Street, London, S.W.1, at 7.30 p.m. on February 15. Annual dinner, dance and floorshow. Tickets (price £3 3s. each) obtainable from Mr. A. J. Edwards, 18 Copenhagen Street, London, N.1.

Prescribers Press

What doctors are reading about developments in drugs and treatments

ACETIC acid is a useful agent for the treatment of superficial wounds infected with *Pseudomonas aeruginosa*, report workers at Makerere University College, Uganda. They have compared the effects of twice-daily dressings with 5 per cent. acetic acid with the effects of chlorhexidine or hypochlorite (eusol) dressings. In ten patients treated with acetic acid the mean growth score fell from 4.1 to 0.7 in eight days while in the controls the score remained almost the same throughout the trial period. The acetic acid treatment was completely unsuccessful in only one patient. There was a striking lack of effect against organisms other than *Ps. aeruginosa* and *Staphylococcus aureus* and Proteus increased in many wounds, but in most instances, disappearance of *Ps. aeruginosa* was accompanied by clinical improvement of the wound. A disadvantage of acetic acid was that it could cause quite severe stinging, but the authors set against that its ready availability, cheapness and bacteriological and clinical efficiency (*Lancet*, January 6, p. 11).

BENGAL grain (chana, *Cicer arietinum*), a staple diet of the poor in North India, has been found capable of lowering induced hypocholesterolaemia in man. Workers in Agra, India, report a study in twenty subjects extending over sixty-seven weeks. The subjects had their serum-lipid levels stabilised at a raised level by being fed on a high fat diet; when Bengal grain was substituted for cereals in the diet, a reduction of more than 15 per cent. occurred and was sustained in sixteen of the twenty subjects. The mode of action is uncertain but an increase in excretion of bile acids suggested to the authors increased catabolism of cholesterol into bile acids in the liver (*B.M.J.*, January 6, p. 30).

AN improved and uniform system of labelling of all solutions for infusion and other electrolyte preparations should be made an official requirement

of the British Pharmacopoeia, says *Drug and Therapeutics Bulletin*. The following information (in summary) is recommended:— Contents (preferably using chemical names); volume marked with limits of accuracy; osmolality (using terms such as "isomotic with plasma," "twice plasma osmolality"); concentration (expressed in milliequivalents per litre, non-electrolytes in weight/volume terms); calorific value (for carbohydrates that are metabolised, alcohol, amino acids, fat emulsions, in calories per litre); warning notices (only "Do not use unless the solution is clear" is thought to be of value); date of manufacture, name of maker, and batch number (*D. & T. B.*, January 5).

CONTEMPORARY THEMES

Subjects of contributions in current medical and technical publications.

PLASTICS. Pharmaceutical uses of. *Aust. J. Pharm.* October 30, p. S104.

BUFFERED PILOCARPINE EYE-DROPS A.P.F. *Aust. J. Pharm.* October 30, p. S108.

THIACETAZONE. Nonaqueous titration of, with acetic perchloric acid. *Indian J. Pharm.* November, p. 307.

THE RELEASE OF ANTIBIOTICS FROM PETROLATUM BASE. Influence of surface-active agent. *Indian J. Pharm.* November, p. 309.

SPIRAMYCIN in the prevention of postoperative staphylococcal infection. *Lancet*, January 6, p. 1.

ACETIC ACID in the treatment of superficial wounds infected by *Pseudomonas aeruginosa*. *Lancet*, January 6, p. 11.

AMPICILLIN in the treatment of *Listeria monocytogenes* meningitis. *Lancet*, January 6, p. 16.

B.C.G. Vaccination of children against leprosy in Uganda: Results at end of second follow-up. *Brit. med. J.*, January 6, p. 24.

CARCINOMA OF PROSTATE: Response of plasma luteinizing hormone and testosterone to oestrogen therapy. *Brit. med. J.*, January 6, p. 28.

BENGAL GRAIN. Hypocholesterolaemic effect of: A long-term study in man. *Brit. med. J.*, January 6, p. 30.

PROSTAGLANDINS. Effects of on human bronchial muscle. *Nature*, January 6, p. 69.

BRADYKININ. New test for biological identification of. *Nature*, January 6, p. 70.

POLYPHENOLS, convulsant action of. *Nature*, January 6, p. 84.

BRUCELLOSIS SYMPOSIUM. *Vet. Rec.* January 6, p. 7.

INTRAMAMMARY TREATMENT of bovine mastitis. The value of large volumes of aqueous vehicle and corticosteroids. *Vet. Rec.* January 6, p. 2.

ORAL INHALATION AEROSOLS. *Amer. J. hosp. Pharm.* November, p. 602.

INTERDEPARTMENTAL PHARMACY SERVICE IN HOSPITALS. *Amer. J. hosp. Pharm.* November, p. 610.

A REVISED MANUAL MEDICATION SYSTEM. Development of, in a Community Hospital. *Amer. J. hosp. Pharm.* November, p. 617.

PRINT AND PUBLICITY PUBLICATIONS

Medical Propaganda

Manufacturers' leaflets, folders, booklets, etc., directed to doctors but available to pharmacists.

BEECHAM RESEARCH LABORATORIES, Great West Road, Brentford, Middlesex: "Pyopen" (30-p. booklet).

BRISTOL LABORATORIES, LTD., Astronaut House, Feltham, Middlesex: "Bristrex" (file card).

CALMIG, LTD., Crewe, Ches: "Magmilor" (8-p. folder).

DUNCAN, FLOCKHART & EVANS, LTD., London, E.2: "Paramol-118" (file card).

GLAXO LABORATORIES, LTD., Greenford, Middlesex: "Efcortisol" (file card).

JOHN WYETH & BROTHER, LTD., Taplow, Maidenhead, Berks: "Prondol" (19-p. booklet).

LEDERLE LABORATORIES, division of Cyanamid of Great Britain, Ltd., Bush House, Aldwych, London, W.C.2: "Myambutol" (6-pp.).

MERCK SHARP & DOHME, LTD., Hoddesdon, Herts: "A guide to the use of Indocin (indomethacin) in the treatment of a variety of arthritic disorders" (30-p. booklet).

ORGANON LABORATORIES, LTD., Grain House, Morden, Surrey: "Dilavase in cerebrovascular insufficiency" (9-p. booklet).

SELPHARM LABORATORIES, LTD., Percival House, Pinner Road, Harrow, Middlesex: "Obesity: A survey of its causation and treatment" (126-p. booklet describing the condition, its causes and treatment, with appendices on weights, diets and calorific values of food-stuffs).

SYNTAX PHARMACEUTICALS, LTD., St. Ives House, Maidenhead, Berks: Recognition guide for oral contraceptives (card).

THE BRITISH DRUG HOUSES, LTD., Graham Street, London, N.1: "Fluoderm and Fluoderm plain" (6-p. booklet). "Nuvocon" (3-p. folder).

NEW COMPANIES

P.C.=Private Company. R.O.=Registered Office.

ANTHONY RICHARD COX, LTD. (P.C.).—Capital £100. To carry on the business of chemists, druggists and librarians, etc, Directors: Anthony R. Cox and Walter M. Bingham. R.O.: 25 The Precinct, Hurst Park, West Molesey, Surrey.

MANOR CHEMICALS (HOLDINGS), LTD. (P.C.).—Capital £100. Subsidiaries: R. H. V. Dixon and Peter Barton, both solicitors of 3 Throgmorton Avenue, E.C.2.

COMMERCIAL TELEVISION

The information given in the table is of number of appearances and total screen time in seconds. Thus 7/105 means that the advertiser's announcement will, during the week covered, be screened seven times and for a total of 105 seconds.

Period—January 21-27

PRODUCT	London	Midland	North	Scotland	Wales & West	South	North-east	Anglia	Ulster	Westward	Border	Grampian	Eireann	Channel Is.
Anadin...	1/30	2/60	2/60	2/47	4/120	1/30	2/60	1/30	5/81	—	—	1/30	—	2/60
Bisodol...	—	4/28	—	—	—	—	—	—	—	—	—	—	—	—
Complan...	7/105	—	6/90	—	—	6/90	—	—	—	—	—	—	—	—
Dentur-creme...	—	—	—	4/120	2/60	—	2/60	—	3/90	3/90	3/90	3/90	—	3/90
Dettol...	—	3/135	—	—	—	—	—	—	—	—	—	—	—	—
Disprin...	1/30	3/60	—	1/15	1/30	—	—	2/45	6/150	1/30	2/45	2/45	—	2/45
Horlicks...	2/60	4/120	4/120	3/110	5/160	4/120	4/130	4/120	5/150	3/90	3/90	4/140	2/37	—
Nulon...	—	—	—	—	—	—	—	2/60	2/60	1/30	1/30	1/30	—	1/30
Respite...	—	—	4/120	—	—	—	—	—	—	—	—	—	—	—
Steradent...	2/60	1/30	3/90	1/30	—	—	1/30	4/120	2/60	1/30	—	2/30	—	2/60
Throaties...	—	—	5/75	—	—	5/75	6/90	—	—	—	—	—	—	—
White Cross cough mixture...	—	—	3/45	—	—	—	6/90	—	—	—	—	—	—	—
Wright's coal tar soap...	1/15	—	—	—	—	1/15	—	1/15	—	—	—	—	—	—